

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 24 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N36496** (0)
1. Corporation Name
YAN BIAN KOREAN CHINESE TECHNICAL INSTITUTE, INC

DO NOT WRITE IN THIS SPACE

Principal Place of Business
**3 W. GARDEN ST.
SUITE 370
PENSACOLA FL 32501
US**

Mailing Address
**P. O. BOX 706
PENSACOLA FL 32501
US**

3. Date Incorporated or Qualified
01/31/1990

3a. Date of Last Report
02/11/1994

4. FBI Number
59-3015742

Applied For
☐ Not Applicable

2. Principal Place of Business
21 3 W. GARDEN ST

2a. Mailing Address
26 PO Box 12268

Suite, Apt. #, etc.
22 Suite 373

Suite, Apt. #, etc.
27

City & State
23 PENSACOLA FL

City & State
28 PENSACOLA FL

Zip
24 32501

Country
25 US

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BELL, KENNETH B
3149 BELLE CHRISTIANE PLACE
PENSACOLA FL 32501-3147**

81 Name
DUNKERLEY, DONALD A.

82 Street Address (B.O. Box Number is Not Acceptable)
3741 McCLELLAN RD

83

84 City
PENSACOLA

FL 85 Zip Code
32503

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
DP
NAME
BELL, KENNETH B
STREET ADDRESS
3149 BELLE CHRISTIANE PL
CITY - ST - ZIP
PENSACOLA FL

1.1 TITLE
RESIGNED
1.2 NAME
Deletion
1.3 STREET ADDRESS
Change
1.4 CITY - ST - ZIP
Addition

TITLE
DV
NAME
KIM, JAMES C. K.
STREET ADDRESS
3620 GOYA CT
CITY - ST - ZIP
PENSACOLA FL

2.1 TITLE
DP
2.2 NAME
KIM, JAMES C. K.
2.3 STREET ADDRESS
1912 PARKWOOD DR
2.4 CITY - ST - ZIP
SAN MATEO, CA 94403

TITLE
DST
NAME
DUNKERLEY, DONALD A
STREET ADDRESS
3941 McCLELLAN RD
CITY - ST - ZIP
PENSACOLA FL

3.1 TITLE
Change
3.2 NAME
Addition
3.3 STREET ADDRESS
Change
3.4 CITY - ST - ZIP
Addition

TITLE
D
NAME
WORSHAM, JOSEPHUS
STREET ADDRESS
2319 LACY CIRCLE
CITY - ST - ZIP
PENSACOLA FL

4.1 TITLE
DV
4.2 NAME
WORSHAM
4.3 STREET ADDRESS
Change
4.4 CITY - ST - ZIP
Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
Change
5.2 NAME
Addition
5.3 STREET ADDRESS
Change
5.4 CITY - ST - ZIP
Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
Change
6.2 NAME
Addition
6.3 STREET ADDRESS
Change
6.4 CITY - ST - ZIP
Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/95 444-7589