

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90221 008 \*\*\*\*61.25

**DOCUMENT # N39084**

1. Entity Name

**MISTY MORNING, INC.**



Principal Place of Business

**10033 9TH STREET NORTH  
STE 102  
ST PETERSBURG FL 33716**

Mailing Address

**10033 9TH STREET NORTH  
STE 102  
ST PETERSBURG FL 33716**

11034433



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-3020923**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BRADLEY, P.J.  
10033 9TH ST N  
STE 102  
SAINT PETERSBURG FL 33716**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **BRADLEY, P.J.**  
STREET ADDRESS **10033 9TH ST N STE 102**  
CITY-ST-ZIP **SAINT PETERSBURG FL 33716**

TITLE **D** ☐ Delete  
NAME **CHOI, JULIA H.**  
STREET ADDRESS **113 S MCDILL AVE STE B**  
CITY-ST-ZIP **TAMPA FL 33609**

TITLE **D** ☐ Delete  
NAME **SONG, KEUM S**  
STREET ADDRESS **13904 LAKESHORE BLVD**  
CITY-ST-ZIP **HUDSON FL 34687**

TITLE **D** ☐ Delete  
NAME **CHO, JAI H**  
STREET ADDRESS **13701 BRUCE B DOWNS BLVD**  
CITY-ST-ZIP **TAMPA FL 33613**

TITLE **D** ☐ Delete  
NAME **SONG, MICHAEL**  
STREET ADDRESS **1152 CT ST**  
CITY-ST-ZIP **CLEARWATER FL**

TITLE **D** ☐ Delete  
NAME **CHANG, IKKON**  
STREET ADDRESS **15020 ROCKY LEDGE**  
CITY-ST-ZIP **TAMPA FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE *[Signature]*

1/14/03

727-578-6400

CR2E037 (10/02)