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

## Apr 23, 2003 8:00 am Secretary of State DOCUMENT # N9300000621 04-23-2003 90119 049 \*\*\*\*61.25 KOREAN-AMERICAN COMMUNITY RELATIONS COUNCIL OF S OUTH FLORIDA, INC. Principal Place of Business Mailing Address 8445 .S.W 148TH DR. 8445 .S.W 148TH DR. MIAMI FL 33158 MIAMI FL 33158 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-0388106 Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent فتحاريا المعجود فراجر والصادات والمحولات WHANG, SANG Y Street Address (P.O. Box Number is Not Acceptable) 8445 S.W. 148TH DR. **MIAMI FL 33158** City 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 FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. TITLE ☐ Delete TITLE Change Addition WHANG, SANG Y. NAME NAME 8445 SW 148TH DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAM! FL TITLE VD. Delete TITLE ☐ Change Addition ALLEN, MIMI H. NAME NAME STREET ADDRESS STREET ADDRESS 2373 DATE PALM RD. CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL** TITI F VSD ☐ Delete TITLE ☐ Addition NAME HONG, GENE S.J. NAME STREET ADDRESS 9365 SW 181ST TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL TITLE ☐ Delete TITLE Change ☐ Addition IM. CHUN HO NAME NAME STREET ADDRESS 184 HIBISCUS DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI BEACH FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

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.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

ESTANG Y WHANG

**FILED**