

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # N95000000315 (0)**

1. Corporation Name

**NARROW WAY MISSIONS, INC.**



Principal Place of Business

Mailing Address

**6921 NW 6TH CT  
MARGATE FL 33063**

**6921 NW 6TH CT  
MARGATE FL 33063**

3. Date Incorporated or Qualified

**01/23/1995**

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**KIM, IK JOONG  
6921 NW 6TH CT  
MARGATE FL 33063**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

☒ DELETE

NAME

**HA, JOONG JO**

STREET ADDRESS

**11804 SW 54TH ST**

CITY-ST-ZIP

**COOPER CITY FL 33330**

TITLE

D

☒ DELETE

NAME

**KIM, IK JOONG**

STREET ADDRESS

**6921 NW 6TH CT**

CITY-ST-ZIP

**MARGATE FL 33063**

TITLE

D

☐ DELETE

NAME

**LEE, SANG KYUN**

STREET ADDRESS

**3100 NE 48TH ST #718**

CITY-ST-ZIP

**FT LAUDERDALE FL 33308**

TITLE

D

☐ DELETE

NAME

**YOO, YOUNG LAI**

STREET ADDRESS

**7701 SELEM LA**

CITY-ST-ZIP

**PARKLAND FL 33067**

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P

☒ Change ☐ Addition

1.2 NAME

**Kim, Ik Joong**

1.3 STREET ADDRESS

**6921 NW 6th CT Margate Fl 33063**

1.4 CITY-ST-ZIP

2.1 TITLE

V

☐ Change ☒ Addition

2.2 NAME

**Han, Young Jae**

2.3 STREET ADDRESS

**11931 Royal Palm Blvd Apt 104**

2.4 CITY-ST-ZIP

**Coral Springs, Fl 33065**

3.1 TITLE

S

☐ Change ☒ Addition

3.2 NAME

**Chun, Myung Chul**

3.3 STREET ADDRESS

**321 Sabal Park Place Apt 107**

3.4 CITY-ST-ZIP

**Longwood, Fl 32779**

4.1 TITLE

D

☐ Change ☒ Addition

4.2 NAME

**Han, Kee Don**

4.3 STREET ADDRESS

**11851 Royal Palm Blvd Apt 203**

4.4 CITY-ST-ZIP

**Coral Springs, Fl 33065**

5.1 TITLE

D

☐ Change ☒ Addition

5.2 NAME

**Nam, Jung Il**

5.3 STREET ADDRESS

**375 NW 9th Way**

5.4 CITY-ST-ZIP

**Coral Springs, Fl 33071**

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**600001765206**

**-04/01/96--01109--002**

**\*\*\*70.00**

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 119.07(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:

**KIM IK JOONG**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)