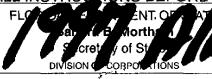
PLEASE READ ALL INSTRUCTIONS BEFORE COMP







FILED Jun 17 1997 8:00am Secretary of State

E HERRICH BIB 1818 | BHILL BALLL BALL

HALL AMASSEE FLORIDA

DOCUMENT #

1. Corporation Name

N95000003361

LEE'S TAE KWON DO CHARITY, INCORPORATED

Principal Place of Business

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Mailing Address

NORTH PALM BEACH FL 33480	NORTH PALM BEACH FL 33480	
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i danama				4 1					11118 61141 1191 1891	
	rincipal Office Address, If Ap		h incorrect information and enter correction below. B. New Mailing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 07/19/1995				
Sulte, Apt. #, etc.		Sulte, A	Sulte, Apt. #, etc.			S SSIN AND AND AND AND AND AND AND AND AND AN			Applied For	
City & Ste	ile	City & S	City & State						Not Applicable	
Zip Country Zip				Country			6. CERTIFICATE OF STATUS DESIRED for a Certificate of Status			
7. Name:	s and Street Addresses of Ea		r (Florida nonprofit							
Title(s) 2 Name of Officers and/or Directors 2 LSE, CHU YOUNG P.T.			Street Address of Each Officer and/or Director and/or Director and/or Director and Control of the State of th		City / State / Zip					
							PALM BUNCH GARDENS. FI 934/0			
_ :	Solver in Atradato			EECH	obse bivd		WEST PALM BEACH, FI.			
				DRIFTWOOD RA			NOCTH PALM BEACH, FI.			
						Fig. 7.	-06/19/97 -06/19/97 	/01106 25 ***	005 ***61.25	
	8. Name and Addre	ss of Current Registere	d Agent			9. Name and Address of New Registered Agent				
YOUNG LEE, CHU PLEASE NOTE NAME CORRECTION 779 NORTHLAKE BLVD. NORTH PALM BEACH FL 33408				an	Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code				ode	
10. I, bei Signature Registere		bur -	corporation, am fai		h and accept the o	bligations of Secti				
11. D	oes this corporat ept. of Revenue	ion pay any int under S. 199.0	angible tax 32, Florida	to the	e ites. Yes	□ No ✓		er side for info intangible ta:	ormation K.)	
this re owed	fy that I am an officer or direct instatement application, the re- by the corporation have been application is true and accu	eason for dissolution has n paid and the names of i	been eliminated, th ndividuals listed on	ne corpo this form	rate name satisfies n do not qualify for	the requirements an exemption und	of section 607.0401 or 6	317.0401, F.S	., that all fees 🔔	
SIGNA	TURE:	Hams &	E OF SIGNING OFFIC	N LL CER OR D	Toung L	ee	5/27/97	Daylime Ph	881-7070	