

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 24, 2002 8:00 am**  
**Secretary of State**

07-24-2002 90134 005 \*\*\*150.00

**DOCUMENT # P00000058123**

1. Entity Name

**HOSANA BLACK POINT, INC.**

Principal Place of Business

**1239 FAIRLAKE TRACE #1305  
 WESTON FL 33326**

Mailing Address

**1239 FAIRLAKE TRACE #1305  
 WESTON FL 33326**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**65-1013555**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**AHN, OK SANG  
 1239 FAIRLAKE TRACE  
 #1305  
 WESTON FL 33326**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Delete  
**P AHN, OK SANG**  
 STREET ADDRESS **1239 FAIRLAKE TRACE, #1305**  
 CITY-ST-ZIP **WESTON FL 33326**

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

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
 STREET ADDRESS  
 CITY-ST-ZIP

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

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

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**OK SANG**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/17/02**

**305-125-3500**

CR2E034 (4/02)

HOSANA BLACK POINT, INC.  
1239 FAIRLAKE TRACE, #1305  
WESTON, FL 33326

TEL (954) 349-4346

July 17, 2002

DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

Re: Request for a waiver of penalty  
Document # (P00000058123)

Dear sir or madam,

This is in request for a waiver of late filing penalty on our corporation's 2002 Uniform Business Report ("Report"). We did not realize the fact that we did not file the report on or before May 1, 2002 until we received a second notice from you few days ago. We were not familiar with the laws of Florida, however, we understand that we may be allowed one time waiver. We have enclosed \$150.00 (fee for 2002) along with the report.

Please update your record and waive late filing penalty if there is any. Contact us if you have any questions.

Sincerely,

*OKSANG Ahn*  
Ok Sang Ahn  
President

Enclosure

Attachment  
30131869