


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 19, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P0000098074 1. Entity Name WINDERMERE AMURA CORPORATION	
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Principal Place of Business 7786 W. SAND LAKE RD ORLANDO, FL 32819	Mailing Address 7786 W. SAND LAKE RD ORLANDO, FL 32819
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**DO NOT WRITE IN THIS SPACE**



03132007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3679624	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

MOON, SUK H  
7786 W. SAND LAKE RD  
ORLANDO, FL 32819

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000671131  
03/28/07-80014-015 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHUNG, CHRISTOPHER K 7786 W. SAND LAKE RD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD MOON, SUK H 7786 W. SAND LAKE RD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MOON, TSCHUN M 7786 W. SAND CAKE RD. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CHUNG, SCARLET 7786 W. SAND LAKE RD. ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KANG, HYUN H 7786 W. SAND LAKE RD ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  3/13/2007  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #