

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90138 013 ***150.00

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1. Entity Name
SIGN AND SHINE INC.



Principal Place of Business
**7207 FOX PARK CT
TAMPA FL 33615**

Mailing Address
**P.O. BOX 260502
TAMPA FL 33685**

11029888



2. Principal Place of Business

9920 STOCK BRIDGE DR.
Suite, Apt. #, etc.

3. Mailing Address

P.O. BOX 260502
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

TAMPA FL

City & State

TAMPA, FL

4. FEI Number

59-3716170

Applied For

☐ Not Applicable

Zip

33626

Country

HILLSBOROUGH

Zip

33685

Country

HILLSBOROUGH

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HONG, MOUNG K
7207 FOX PARK CT
TAMPA FL 33615**

7. Name and Address of New Registered Agent

Name

MOUNG K. HONG

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

9920 STOCK BRIDGE DR.

City

TAMPA

FL

Zip Code

33626

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/18/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D HONG, MOUNG K**
STREET ADDRESS **7207 FOX PARK CT**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ Delete
NAME **D HONG, JIN S**
STREET ADDRESS **7207 FOX PARK CT**
CITY-ST-ZIP **TAMPA FL 33615**

TITLE ☐ Delete
NAME **V TORTORELLO, JOHN V**
STREET ADDRESS **4822 BONITA VISTA DR**
CITY-ST-ZIP **TAMPA FL 33634**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D MOUNG K. HONG**
STREET ADDRESS **9920 STOCK BRIDGE DR.**
CITY-ST-ZIP **TAMPA, FL 33626**

TITLE ☒ Change ☐ Addition
NAME **D JIN S. HONG**
STREET ADDRESS **9920 STOCK BRIDGE DR.**
CITY-ST-ZIP **TAMPA, FL 33626**

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

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

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

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

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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/03

Date

813-886-6992

Daytime Phone #

CR2E034 (10/02)