2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128577

Entity Name: ZENITH LEE, INC.

FILED Mar 09, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1092 S. PONCE DE LEON BLVD. ST. AUGUSTINE, FL 32084 **Current Mailing Address: New Mailing Address:** 1092 S. PONCE DE LEON BLVD. ST. AUGUSTINE, FL 32084 FEI Number: 11-3666075 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: 1092 S. PONCE DE LEON BLVD. ST. AUGUSTINE, FL 32084 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: KIM, LUKE Name: KIM, LUKE 184 BAYSIDE DR. 85 PARK PLACE BLVD Address: Address: City-St-Zip: PALM COAST, FL 32317 City-St-Zip: SAINT AUGUSTINE, FL 32084 Title: Title: () Delete (X) Change () Addition Name: LEE, MIN A Name: LEE, MIN A 117 PORPOISE BAY RD., #307 117 PORPOISE BAY RD., #307 Address: Address: DAYTONA BEACH, FL 32119 SAINT AUGUSTINE, FL 32119 City-St-Zip: City-St-Zip: Title: () Delete Title: PT (X) Change () Addition LEE, MIN A LEE, MIN A Name: Name: 117 PORPOISE BAY RD. #307 1050 BELLA VISTA BLVD #130 Address: Address: DAYTONA BEACH, FL 32119 City-St-Zip: SAINT AUGUSTINE, FL 32084 City-St-Zip: Title: VΡ () Delete Title: VΡ (X) Change () Addition KIM, LUKE KIM, LUKE Name: Name: Address: 184 BAYSIDE DR. Address: 85 PARK PLACE BLVD City-St-Zip: PALM COAST, FL 32317 City-St-Zip: SAINT AUGUSTINE, FL 32317 () Delete Title: Title: (X) Change () Addition LEE, JUNG HEE Name: KIM, LUKE Name: 117 PORPOISE BAY RD. #307 Address: 85 PARK PLACE BLVD Address: City-St-Zip: DAYTONA BEACH, FL 32119 City-St-Zip: SAINT AUGUSTINE, FL 32084

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUKE, KIM VP 03/09/2004