

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088042

Entity Name: CHONGKWANJANG, INC.

FILED
Aug 31, 2008
Secretary of State

Current Principal Place of Business:

4409 HOFFNER AVE SUITE 327
ORLANDO, FL 32812

New Principal Place of Business:

Current Mailing Address:

4409 HOFFNER AVE SUITE 327
ORLANDO, FL 32812

New Mailing Address:

FEI Number: 32-0089124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNOLLY, JOSEPH F II
4218 ARAJO COURT
BELLE ISLE, FL 32812 US

Name and Address of New Registered Agent:

CONNOLLY, JOSEPH F II
4409 HOFFNER AVE SUITE 327
ORLANDO, FL 32812 US

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:

08/31/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CONNOLLY, JOSEPH F II
Address: 4218 ARAJO COURT
City-St-Zip: BELLE ISLE, FL 328122807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONNOLLY, JOSEPH F II
Address: 4409 HOFFNER AVENUE, SUITE 327
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOSEPH F. CONNOLLY, II

DIR

08/31/2008

Electronic Signature of Signing Officer or Director

Date