2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005 8:00 am
Secretary of State
05-06-2005 90097 047 ***150.00

DOCUMENT # P04000032069

1. Entity Name
KJK INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
301 MIRACLE STRIP PARKWAY FORT WALTON BEACH, FL 32548	301 MIRACLE STRIP PARKWAY FORT WALTON BEACH, FL 32548

01232005 Chg-P CR2E034 (10/03)

2. Principal Place of Business		3. Mailing Address	
85 4th Ave			
Suite, Apt. #, etc. Shalimar.		Suite, Apt. #, etc	
City & State FL 32579		City & State	
Zip	Country okaloosa	Zip	Country

4. FEI Number 20-0720985 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KIM, BYEONG M
85 4th Avenue
Shalimar FL 32579

7. Name and Address of New Registered Agent

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 ____________________

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	P/V/S Kim, Byeong M. 463 West Park Dr Mary Esther, FL 32569	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
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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: X [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR