

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90131 016 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P04000069049		
1. Entity Name WHEEL WORLD 3, INC.		
Principal Place of Business 4690 NW 167TH STREET MIAMI, FL 33054	Mailing Address 4690 NW 167TH STREET MIAMI, FL 33054	40092961  04272008 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable
6. Name and Address of Current Registered Agent CHUNG, BRIAN 4690 NW 167TH STREET MIAMI, FL 33054		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 _____ Signature, typed or printed name or registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHUNG, BRIAN 4690 NW 167TH STREET MIAMI, FL 33054	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHUNG, BELINDA 679 MIDDLE RIVER DR. FORT LAUDERDALE, FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHUNG, DIANA 679 MIDDLE RIVER DR. FORT LAUDERDALE, FL 33304	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 duly empowered.		
SIGNATURE: <i>[Signature]</i> BELINDA CHUNG SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 305 625 6730 Daytime Phone #