2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # P04000094377 02-21-2005 90086 045 ***150.00 1. Entity Name ASAHI ORIENT, INC. Principal Place of Business Mailing Address 66012762 124 ROBIN ROAD 124 ROBIN ROAD ALTAMONTE SPRINGS FL 32701 US ALTAMONTE SPRINGS FL 32701 2. Principal Place of Business 3. Malling Address Suite Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 68-0587750 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KIM; KYONG I Street Address (P.O. Box Number is Not Acceptable) 375 PALM SPRINGS DRIVE #1210 **ALTAMONTE SPRINGS FL 32701** City Winter Park 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. (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550,00 Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPS DPS TITLE TITLE 🔀 Odeta Addition Kim, Kyong NAME KIZZIAR, MICKEY MALE Winter park Dri STREET ADDRESS 375 PALM SPRINGS DRIVE #1210 STREET ADDRESS ALTAMONTE SPRINGS FL 32701 CITY-ST-ZIP CITY-\$1-7IP TITLE Deleta TITLE Addition Change MAME MALME STREET ADORESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NUME STREET ADDRESS STREET ADDRESS · Cm r · ST · ZIF CITY-ST-70 TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZOP CHY.ST.70 RILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-51-73P RTLE TIBE Addition Defete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 eath; 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. Kim Kyong I. Kim President 2/2/05(40)339-3359 SIGNATURE:

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

ANNUAL REPORT							
DOCUMENT # P0400094377 1. Entity Name ASAHI ORIENT, INC.							Mary, Williams
Principal Place of Business Mailing Address							
124 ROBIN R	ROAD		124 ROBIN ROAD				660/2162
#1300			#1300				100012102
ALTAMONTE	SPRINGS, F	L 32701 US	ALTAMONTE SPRINGS, FL 32701 US				
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03272005 Chg-P CR2E034 (10/03)
City & State			City & State				4. FEI Number 68-0587756 Applied For Not Applicable
Žip	Country Zip		Zip Country		ntry		5. Certificate of Status Desired See Required \$8.75 Additional
	6. Name	and Address of Current i	Registered Agent				7. Name and Address of New Registered Agent
					Name Shoda, In Cha		
KIM, KYON 375 PALM #1210		S DRIVE			Street Address (P.O. Box Number is Not Acceptable)		
ALTAMON							
·					City A	Ha	monte Springs FL Zip Code 32701
8. The above	named entit	ty submits this statement for	the purpose of changing it	s register	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
the obligations of registered agent.							
SIGNATURE La Sub, In cha Shoda 4/18/05							
SIGNATURE Signature, typod or printed name of registered agent and bite if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees							
10.		OFFICERS AND I	DIRECTORS	11.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	DPS Detete				E	PP	
NAME					tE	She	oda, In Cha
STREET ADDRESS 375 PALM SPRINGS DRIVE, #1: CITY-SI-ZIP ALTAMONTE SPRINGS, FL 327				EET ADDRESS '-ST-7IP	88.	oda, In Cha 2 Oniento Ave. # A tamonte Springs, FC 32701	
	ALTAMO	NIE SPRINGS, FL 327		_	-51-21	HIC	rumonte springs, I-C 321-1
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CITY-ST-ZIP					-ST-ZIP		
12. Thereby certify that the information supplied with this filling 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.							
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR							
l			v. sidneta officel	. on singl			Date Daytime Phone #

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Please excuse the delay in returning this letter.

The delay was because the corporations has
been purchased by In Cha Shoda. The

annual report listing her a registered

agent, - D.P. S., is the current and

correct report.