FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business	Mailing Address		
6145 NW 7THA VE Miami Fl 33127 US	6145 NW 7TH AVE Miami FL 33127 US		

FILED Apr 01 1998 8:00am Secretary of State

1. Corporation	MENT # P9300 ARO USA, INC.	0003791 (9	∌)		<u> </u>
Principal Plac	ce of Business	Mailing Address			0106 10110 1 0010 10161 1101 1601
6145 NW 7	7THA VE	6145 NW 7TH AVE			
MIAMI FL		MIAMI FL 33127			
US		US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
2. Principal I	Place of Business	2a. Mailing Address		01/12/1993 4. FEL Number	Applied For
21		26		65-0381690	Not Applicable
Suite, Apt	. #, etc	Suito, Apt. #, etc.	. 7 10 780, 880, 31 1984, 24 20 20 20 20 20 20 20 20 20 20 20 20 20		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		26		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	- /
24	25	29	30		Yes No
	9. Name and Address of Current	Registered Agent	B1 Name	10. Name and Address of New Registered	Agent
	EE, BUM S		B1 Name		
	3145 NW 7TH AVE		82 Street Add	fress (P.O. Box Number is Not Acceptable)	
ŀ	MIAMI FL 33127		83		
			63		
			84 City	FL	85 Zip Code
44 0	10			poration submits this statement for the purpose o	
SIGNATURE	Signature, typod or jointed name of registered agen OFFICERS AND		OTI Registered Agent signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	D DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME	LEE, BUM S		1.2 NAME		
STREET ADDRESS	720-7 COCO PLUM CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CHY - ST - ZIP		
TITLE	\$D	☐ DELETE	2.1 TITLE		Change Addition
NAME	LEE, MYUNG S		2.2 NAME		
STREET ADDRESS	720-7 COCO PLUM CIRCLE		2.3 STREET ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33324	T Sector	2.4 CITY-ST-ZIP		[] (harris
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3 4. CITY - ST - ZIP 4 1 TITLE		Change Addition
NAME		[Detect	4 2 NAME		T CHRUNG TH VIGORIAN
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	1		5.4 CITY- ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7P		

14. Thereby 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 annual report or supplied annual 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 trusted empowered to execute this report as required by Chapter 607, fiorida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.