

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 27, 2003 8:00 am**  
**Secretary of State**

06-27-2003 90050 006 \*\*\*150.00

DOCUMENT # P 93000013158

1. Entity Name

CHA S. Kim, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

8680 PARK BLVD

3. Mailing Address

275 HERITAGE ISLES WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SEMINOLE, FL

City & State

BRADENTON, FL

4. FEI Number

59-3166459

Applied For

Not Applicable

Zip

33777

Country

FLORIDA

Zip

34212

Country

FLORIDA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

CHA S. Kim

Street Address (P.O. Box Number is Not Acceptable)

275 HERITAGE ISLES WAY

City

BRADENTON

FL

Zip Code

34212

**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 of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

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  
DPS  
CHA S. Kim  
275 HERITAGE ISLES WAY  
BRADENTON, FL 34212

TITLE  
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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

CHA S. Kim

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/25/03

941-748-7402

CR2E034B (12/02)

Attachment

10108895

## CHA S. KIM, INC.

275 Heritage Isles Way, Bradenton, FL 34212

June 23, 2003

Annual Reports Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Annual Report

# P 93000013158  
year 2003

Dear Sir / madam:

In accordance with our telephone conversation with one of your staff, I am writing this letter along with the enclosed form of annual report and a check of \$ 150.00.

As you may note in the annual report form, the address is changed. We could not figure out why the address was not corrected and we did not receive renewal notice form at all.

The correct mailing address is as follows:

275 Heritage Isles Way, Bradenton, FL 34212

Inasmuch as we never received the form and any notice at all and we did not try to ignore nor disregard the rules and regulation, we are respectfully requesting you to abate any possible late filing penalty.

We thank you very much for your consideration in this matter and please feel free to call me should you have any questions in this matter.

Very truly yours,

Cha S. Kim  
Enclosure