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

DOCUMENT # P93000035811 (7)

Y.K. KIM TAE KWON-DO, INC.

Principal Place of Business	Mailing Address
136 S. WOODLAND AVE.	136 S. WOODLAND AVE.

FILED Apr 20 1998 8:00am Secretary of State



136 S. WOOL DELAND FL S		136 S. WOODLAND AVE. DELAND FL 32720			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified 05/17/1993		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-3186099	<u> </u>	ot Applicable
Suite, Apt.	#, etc	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional
22		27					Required
City & State		City & State			B. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip ─┐	Country	Zip	Count	У	8. This corporation owes or has paid the cur		
24	9. Name and Address of Cu	29	30		Personal Property Tax due June 30. 10. Name and Address of New Registered		∐ No
		Ment Registered Agent	- la	Nam		Agont	
	NN, KEITH J		Ľ				
	S S. WOODLAND BLVD.		(B:	Stree	et Address (P.O. Box Number is Not Acceptable)		
UE	LAND FL 32720		8:	 			
				<u></u>			
			8	City	FI	85 Zip	Code
41 Pureuant	to the provisions of Sertions 607	0502 and 607 1509 Florida Statul	as the abo	(9.name		changing	ite registere
office or r agent. I a	egistered agent, or both, in the t m familiar with, and accept the c	State of Florida. Such change was obligations of, Section 607.0505, Fl	authorized b orida Statute	y the c	ed corporation submits this statement for the purpose o prporation's board of directors. I hereby accept the app	ointment a	s registered
SIGNATURE	<u> </u>				ure required when reinstating) DATE		
12.	Signature, byped or printed name of registers OF FICERS	S AND DIRECTORS	13.	ent signat	ure required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DS IN 12
TITLE	DP OFFICER	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	Change	
NAME	LYNN, KEITH J		1.2 NAME				
STREET ADDRESS	136 S. WOODLAND BLVI	1		T ADDRES	2		
CITY-ST-ZIP	DELAND FL 32720	,	1.4 City-				
TITLE		DELETE	2.1 TITLE	31-20		Change	Addition
NAME		- ·	2.2 NAME				
STREET ADDRESS			- 4	T ADORES			
CITY-ST-ZIP			2. 4 CITY		· ·		
TITLE		☐ DELETE	3.1 TITLE	01 21		Change	Addition
NAME		_	3.2 NAME				_
STREET ADDRESS				T ADDRES	s		
CITY-ST-ZIP			3.4. CITY				
TITLE	***************************************	DELETE	4.1 TITLE	<u> </u>		Change	Addition
NAME			4. 2 NAM				
STREET ADDRESS			4.3 STREE	T ADDRESS	5.		
CITY - ST - ZIP			4.4 CiTY-				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME		_	5.2 NAME			•	
STREET ADDRESS			5.3 STREE	ADDRES:	5		
CITY-ST-ZIP			54 City-	ST-ZIP			
TITLE		DELETE	6.1 TITLE			Change	Addition
NAMF			6.2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY-ST-ZIP			6.4 CHTY-				
	ertity that the information supplie	ed with this filing does not qualify for			ated in Section 119.07(3)(i), Florida Statutes. I further ce	rtify that th	e information

indicated on this annual report or supplied with this goods not qualify for the exemptor stated in Section 119.07(3)(f), Florida Statutes. Turtret certify that if a mornal indicated on this annual report or suppliemental annual report is frue 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 recoiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE.

4-14-98

904-736-9899