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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS May 07, 1999 8:00 am Secretary of State 05-07-1999 90011 023 ***150.00

P93000038248 DOCUMENT # 1. Corporation Name

E J INTERNATIONAL, INC.

Principal Place	of Business	Mailing Address	Mailing Address					
8410 NW 53TH	TERR	8410 NW 53TH TERR						
SUITE 116		SUITE 116				DO NOT WRITE IN THE SPACE		
MIAMI FL 3316	6	MIAMI FL 33166				DO NOT WRITE IN THIS SPACE		
us us						3. Date Incorporated or Qualifed	-	
						05/24/1993		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied		
21		26				65-0424032 Not App	icable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		
22		27	27			Fee Required	<u></u>	
City & State		City & State	City & State		_	6. Election Campaign Financing \$5.00 May	3e	
23		28	28			Trust Fund Contribution Added to Fees		
Zíp	Country Zip			intry		8. This corporation owes the current year Intangible	}	
24	25	29	30			Personal Property Tax.	<u>, </u>	
	9. Name and Address of Current					10. Name and Address of New Registered Agent		
				81	Name	EE, EUNJOO	(
EUN	JOO, LEE			<u> </u>	<u></u>			
8410 NW 53RD TERRACE				82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
SUITE 116				83			——	
MIAMI FL 33166				55				
1710 31				84	City	85 Zip Code		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607 1508, Florida Statute	s, the a	bove-	named corp	poration submits this statement for the purpose of changing its regision's board of directors. I hereby accept the appointment as register	erea	
agent. I a	n familiar with, and accept the obligat	ions of, Section 607.0505, Flor	ida Stati	utes.	na corporati	bit's bodie of directions, thoroby decopt the appearance and an arrangement		
CICAIATUDE								
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE:	Registered	Agent	signature require	ed when reinstating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	P	☐ DELETE	1,1 TI	TLE		☐ Change ☐	Addition	
NAME	LEE, EUN JOO		1.2 N	AME	j)	
STREET ADDRESS	OAAO NIM CODD TERRACE CLUTE 440			TREET A	ADDRESS			
CITY-ST-ZIP	MIAMI FL		14 C	(TY-\$T-	.7IP			
TITLE	VP	DELETE	2,1 TI		=-	Change []	Addition	
	HYUN, KILSOO				Ì		{	
NAME	0440 ANY FORD TERRACE CLUTE 446		li i	2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS		1		i	
CITY-ST-ZIP	MIAMA FL	Florier		ITY-ST	-ZIP	☐ Change ☐	Addition	
TITLE	D	☐ DELETE	3.1 TI			□ citaide □	AUGUOTI	
NAME	HYUN, EUNSANG		3.2 N	AME			{	
STREET ADDRESS 8410 NW 53RD TERRAC, SUITE 116		E 116	3.3 S	3.3 STREET ADDRESS			ļ	
CITY-ST-ZIP	MIAMI FL		3.4. 0	лу-st	ZIP			
TITLE		☐ DELETE	4.1 TI	TLE		Change	Addition	
NAME			4. 2 N	IAME			1	
STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·		TREET	ADDRESS		_	
CITY-ST-ZIP				TY-ST-				
TITLE		☐ DELETE	5.1 Ti		=	Change	Addition	
ſ			5.2 N		-	· — • —	- 1	
NAME					ADDRESS			
STREET ADDRESS					- 1			
CITY-ST-ZIP		□ pri cr-	6.1 TI	ITY-ST	- LIF	☐ Change ☐	Addition	
TITLE		☐ DELETE				Change	Addition	
NAME			6.2 N		}		-	
STREET ADDRESS			6.3 S	TREET	ADDRESS			
CITY-ST-ZIP			6.4 C	ITY-ST-	- ZIP			

CITY-ST-ZIP 14. 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 annual report or supplemental 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 trustee epipowered 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, with all other like empowered.

SIGNATURE:

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