Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90042 019 \*\*\*150.00

## 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

## DOCUMENT # P93000081265

KB INTE	ERNATIONAL BRAID INC.					1			
Principal Plac	ce of Business	Mailing Address	<del></del>				<b>    </b>	(1 <b>9</b> )	
6240 N.E. 4 CT. MIAMI FL 33138 US  6240 N.E. 4 CT. MIAMI FL 33138 US									
						DO NOT WRITE IN THIS SPACE			
					l l	te Incorporated or Qualifed			
***		0-11-11-1				/24/1993		T	-V
2. Principal Place of Business 2a. Mailing Address					l l	4. FEI Number 65-0451989			plied For t Applicable
21	4 -1-	Suite, Apt, #, etc.			00	<u>-045 1969                                  </u>	· ·		Additional
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Cer	rtifcate of Status Desired	1 1	Fee Re	
City & State City & State					6. Fle	6. Election Campaign Financing			May Be
23					I	Trust Fund Contribution			o Fees
Zip Country Zip			Countr	ry	8. This	8. This corporation owes the current year Intangible			
24	25 29					Personal Property Tax.			□No
	<ol> <li>Name and Address of Currer</li> </ol>	nt Registered Agent			10. Nar	me and Address of New R	legistered Ager	ıt	
DAIL	v carron		8	1 Name					
	K, SAM KYU 05 N. W. 11 PLACE		8:	2 Street	Address (P.O. I	Box Number is Not Accepta	ible)		
	NRISE FL 33323		_	<u>.</u>					
SUN	INISE PL 33323		8:	3			,	,	
			8-	4 City		<del> </del>	85	Zip C	Code
						<u> </u>	FL		
office or r agent. I a	to the provisions of Sections 607,050 registered agent, or buth, in the Starbam familiar with, and accept the briga	of Flor ua. Such change was ations of, Section 607.0505, Fl	authorized by orida Statute	ve-named y the corposis.	oration's board	of directors. I hereby accept	t the appointmen	nt as reg	gistered
SIGNATURE		- /2 - 1/4 / 1/2 /	F. S		and a decided and an arrival and arrival arrival and arrival arrival and arrival arrival arrival and arrival arriv	;	DATE		
12.	Signature, typed or printed name of registr 2 afget	ND DIRECTORS	13.	eut signature i	required when reinstat ADD	ITIONS/CHANGES TO OFF		RECTO	RS IN 12
TITLE	DP	DELETE	1.1 TITLE			Ť ·		Change	☐ Addition
NAME	BAIK, SAM KYU	_	1.2 NAME	•				•	
STREET ADDRESS	13305 N.W. 11TH PLACE			ET ADDRESS		i			
CITY-ST-ZIP	SUNRISE FL 33323		1,4 CITY-						
TITLE	DST	☐ DELETE	2.1 TITLE					Change	Addition
NAME	BAIK, CHANG SOOK		2.2 NAME	•					
STREET ADDRESS	40005 1111 44711 01 405		2.3 STRE	ET ADDRESS		1			
CITY-ST-ZIP	SUNRISE FL 33323		2. 4 CITY-	-ST-ZIP			<u> </u>	· <u>· .</u>	
TITLE		☐ DELETE	3.1 TITLE					Change	☐ Addition
NAME			3.2 NAME	i					
STREET ADDRESS			3.3 STRE	ET ADDRESS					
CITY-ST-ZIP			3.4. CITY-	-ST-ZIP		<u> </u>	•		
TITLE		☐ DELETE	4.1 TITLE	:				Change	☐ Addition
NAME			4, 2 NAME	E .					
STREET ADDRESS			4.3 STRE	ET ADDRESS					
CITY-ST-ZIP		·	4.4 CITY-	ST-ZIP	<u> </u>	<u></u>			
TITLE		☐ DELETE	5.1 TITLE				<u></u>	Change ·	. 🔲 Addition
NAME			5.2 NAME			1	<i>:</i> .		
STREET ADDRESS			1	ET ADDRESS					
CITY-ST-ZIP		[] pereze	5.4 CITY- 6.1 TITLE		ļ		<del></del>	Change	Addition
TITLE		☐ DELETE	6.2 NAME				Ц,	√ilalige	
NAME				ET ADDRESS		•			
STREET ADDRESS			l l		1	:			
CITY-ST-ZIP 1	1		6.4 CITY-	SI-ZIP					ì

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 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, with all other like empowered thang Sook Baik, Treasurer

SIGNATURE:

HORE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

 $\frac{1-09-11(305)757}{1-09-11(305)757}$