

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000085863 (7)

1. Corporation Name

KIM'S ENTERPRISE OF ORLANDO, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/13/1993

4. FEI Number

59-3262742

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

Principal Place of Business

2155 WEST COLONIAL DRIVE
ORLANDO FL 32804
US

Mailing Address

2155 WEST COLONIAL DRIVE
ORLANDO FL 32804
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

KIM, CHOM J.
8618 VISTA TERRACE
ORLANDO FL 32825

10. Name and Address of New Registered Agent

81 Name

Young, Kim

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

2155 W. Colonial Dr.

83

84 City

Orlando,

FL

85 Zip Code
32804

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE *[Signature]*
Signature, type or printed name of registered agent and title if applicable

President

9/15/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☒ DELETE
NAME KIM, CHOM
STREET ADDRESS 8618 VISTA TERRACE
CITY-ST-ZIP ORLANDO FL

TITLE PD ☒ DELETE
NAME KIM, YOUNG
STREET ADDRESS 8618 VISTA TERRACE
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PSD ☐ Change ☒ Addition
1.2 NAME Young Kim
1.3 STREET ADDRESS 2155 W. Colonial Dr.
1.4 CITY-ST-ZIP Orlando, FL 32804

2.1 TITLE VTD ☐ Change ☒ Addition
2.2 NAME Chom Kim
2.3 STREET ADDRESS 2155 W. Colonial Dr.
2.4 CITY-ST-ZIP Orlando, FL 32804

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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: *[Signature]*

9/15/98 407-648-0779

CR2E034 (5/98)