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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P94000013814 (6)

RED BUG GOLF RANGE, INC.

Principal Place of Business Mailing Address 7151 RED BLDG LAKE RD 1111 ERMINE AVE OVIEDO FL 32765 WINTER SPRINGS FL 32708 3. Date Incorporated or Qualified 3a. Date of Last Report 02/18/1994 02/07/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 7151 Red Bug Lake Rd 21 59-3276998 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State Crty & State 6. Election Campaign Financing \$5.00 May Be 23 28 Oviedo Trust Fund Contribution Added to Fees Country Zip 32765 Country 8. This corporation has liability for intangible tax under s 199.032, us 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name OH, chae LEE, MYONG K Street Address (P.O. Box Number is Not Acceptable)
7151 Red Bug Lake 82 1111 ERMINE AVE WINTER SPRINGS FL 32708 83 84 70 Code 32765 85 Oviedo 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1. 1 TITLE NAME OH, CHAE YOUNG 1.2 NAME 1595 Sunflower ct Writer pk +1 4405 WILLA ORE DR #209 STREET ADDRESS 1.3 STREET ADDRESS WINTER SARINGS FL CITY-ST-ZIP 32792 1.4 CITY-\$1-ZIP TITLE DELETÉ 2. 1 TITLE Addition NAME LEE. MYONG K 2.2 NAME 1111 ERMINE AVE STREET ADDRESS 2.3 STREET ADDRESS WINTER SPRINGS FL CITY-ST-ZIP 2.4 CITY - ST- ZIP TITLE DELETE 3. 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP THILE DELETE 4. 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C41Y - ST - ZIP TITLE DELETE Secretary 5.1 TITLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIE 5.4 CITY - ST- ZIP TITLE 6 1 THILE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 arrivers.

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

39/96 (101)359-1600

CR2E034