

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

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Apr 14 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 # P94000027783 (7)
1. Corporation Name
THE WORLD KO AM MARTIAL ARTS FEDERATION, INC.



Principal Place of Business
8595 COLLEGE PARKWAY
SUITE A6, COLLEGE PLAZA
FT MYERS FL 33919

Mailing Address
8595 COLLEGE PARKWAY
SUITE A6, COLLEGE PLAZA
FT MYERS FL 33919

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21 9250 College Pkwy	26 9250 College Pkwy		
22 Suite #7	27 Suite #7		
23 City & State Ft. Myers, FL	28 City & State Ft. Myers, FL		
24 Zip 33919	25 Country Lee	29 Zip 33919	30 Country Lee

3. Date Incorporated or Qualified 04/12/1994	
4. FEI Number 65-0494000	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GUAK, NOH GEUN 8595 COLLEGE PARKWAY A6 FORT MYERS FL 33919		81 Name Guak, Noh Geun 82 Street Address (P.O. Box Number is Not Acceptable) 9250 College Pkwy #7 83 84 City Ft. Myers FL 85 Zip Code 33919	

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]* DATE 4-6-98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	1.1 TITLE	DST
NAME	GUAK, N G	1.2 NAME	Guak, N. G.
STREET ADDRESS	8595 COLLEGE PKWY., A-6	1.3 STREET ADDRESS	9250 College Pkwy #7
CITY-ST-ZIP	FT MYERS FL 33919	1.4 CITY-ST-ZIP	Ft. Myers, FL. 33919
TITLE	D	2.1 TITLE	D
NAME	HO JUN, YUNG	2.2 NAME	Jun, Yung Ho
STREET ADDRESS	1303 E. BUSCH BLVD	2.3 STREET ADDRESS	1303 E. Busch Blvd.
CITY-ST-ZIP	TAMPA FL 33612	2.4 CITY-ST-ZIP	Tampa, FL. 33612
TITLE	D	3.1 TITLE	D
NAME	KIM, JUN HYUN	3.2 NAME	Kim, Jun Hyun
STREET ADDRESS	2670 N. UNIVERSITY DR., #203	3.3 STREET ADDRESS	10024 W. Oakland Park Blvd.
CITY-ST-ZIP	SUNRISE FL 33322	3.4 CITY-ST-ZIP	Sunrise, FL. 33357
TITLE	D	4.1 TITLE	
NAME	PARK, HYUN	4.2 NAME	
STREET ADDRESS	924 W. S.R. 436 STE. 1750	4.3 STREET ADDRESS	
CITY-ST-ZIP	ALTAMONTE SPRINGS FL 32714	4.4 CITY-ST-ZIP	
TITLE	PD	5.1 TITLE	
NAME	CHUNG, JIN Y	5.2 NAME	
STREET ADDRESS	2525 NORTH DIXIE HWY	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33460	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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]* 4-6-98 941-433-25

CR2E034 (10/97)