SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P94000040874 (7)

339 HEALTH STUDIO, INC.

FILED Jul 18 1996 8:00 am Secretary of State



Principal Place of Business	Mailing Address 1226 GOOD HOMES RD. ORLANDO FL 32818		r regringer see jalle digt) datur galir garif graff graff datit jalle (bill jall bill bill bill	
339 NE 16TH STR. N. MIAMI BEACH FL 33162				
			3. Date incorporated or Qualified 06/01/1994	3a. Date of Last Report 08/08/1995
2. Principal Place of Business 1 339 NE 167 th S	28. Mailing Address 7 26 339 NE /	SOHA ST	4. FEI Number 59-3251686	Applied For Not Applicable
Suite, Apt. #, etc	Suite. Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 3 N. MIAMI BEACH .	City & State City & State PL 28 N. MIAHI B	BEACH. FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 4 33162 25 DAD	Zip	Country 30 DADE	8. This corporation has liability for Florida Statutes	intangible tax under s 199 032
9. Name and Address of 0			10. Name and Address of New Re	
KIM, SUN CHA 1226 GOOD HOMES RD. ORLANDO FL 32818			You Way PA)R/C
•		84 City /	NE 1814 ST	85 Zip Code
D. and S.	07 05 00 d CO7 16 00 File id- Co4	V_{\bullet}	MIAMI BEACH	رهُ/33 °° FL
 Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am familiar with, and acceptate 	e State of Florida, Such change was au	is, the above-hamed con uthorized by the corporal	poration submits this statement for the p tion's board of directors. Thereby accep	t the appointment as registered
47271376	obligations of Section 607.0505, Flor	rida Statutes.	—	1, +1 91
SIGNATURE Stonature typed or protect man be of regist	tenst agent and their applicable (NO's	. Registerca Agent signal ve requ	a soul where recorded a co	(13)
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE PS	DELETE		SECRETARY	Change X Addition
NAME KIM, SUN CHA			OO WON PARK	
STREET ADDRESS 1226 GOOD HOMES RE	n	1.3 STREET ADDRESS 3	39 NE 1644 ST	
	J.	1.5 STREET ADUNESS	U. MIAMI BEACH . 1	4/33/62
CITY-ST-ZIP ORLANDO FL 32818	DELETE	1.4 GITY - ST - ZIP 2.1 TITLE	VITTINI BOTON	Change Addition
	ال المداد	l i		Grange Audition
NAME		2 2 NAME		
SIREET ADDRESS		2.3 STHEET ADDRESS		
C(TY - ST - ZIP	DELETE	2 4 CITY - ST - ZIP		Charge I Addition
MILE	☐ Deft.ie	3171156		Change Addition
NAME		3 2 NAME		
STREET ADDRESS		3 3 STREET ADDRESS		
C(TY - ST - ZIP	DELETE	3.4 CITY - S1 - ZIP		Channe Lilia
TITLE	L Detell	4 1 TITLE		Change Addition
NAME		4 2 NAME		
STREET ADORESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT or re-	4 4 CITY - ST - ZIP		
Mre	L DELETE	5 1 TITLE		Change Addition
NAME		5.2 NAME		را نیر به
STREET ADDRESS		5 3 STREET ADDRESS		19/11/
CITY-ST-ZIP		5.4 CITY - ST - ZIP		1100
TITLE	DELETE	61 TIFLE	80000189	DB69632V2 Add tio
NAME		6.2 NAME	-07/18/96010	96003 ()
STHEET ADDRESS		6 3 STREET ADDRESS	***238.75	
CITY-ST-ZIP		6.4 CITY - ST - ZIP		
14. I do hereby certify that the information s	arredized with this filme is voluntably for		alify for the exemption stated in Section	110 07/31/k) Floreda Statutos I

root eleby certify that the information supplied whith this hing is voluntarily furnished and odes not quality 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

7/15/96 (305)652-4448