FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

COR ANNU	PROFIT PORATION JAL REPORT 1996	Secre DIVISION O	a B. Morthan etary of State	n			
COCUMENT # P9400053050 (8)  KIM'S NO. MIAMI AVE. SERVICE STATION INC.  Trincipal Place of Business  Mailing Address  18200 N.W. 7TH AVE.  18200 N.W. 7TH AVE.							
MIAMI FL 331		18200 N.W. 7TH AVE MIAMI FL 33169-4304					
					<ol> <li>Date Incorporated or Qualified 07/14/1994</li> </ol>		ast Report   <b>/1995</b>
Principal Pla	nce of Business	2a. Mailing Address 26			4. FEI Number 65-0505215		Applied For
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.		•	Certificate of Status Desired	<b>\$</b>	Not Applicable  8.75 Additional
City & State		City & State	<u></u>		6. Election Campaign Financing		Fee Required 5.00 May Be
Zip	Country	28]	Cour	des	Trust Fund Contribution		Added to Fees
25 29			Country 30		This corporation has liability for intangible tax under s 199.032, Florida Statutes     Yes □ No		
	9. Name and Address of Curro	ent Registered Agent		81 Name	10. Name and Address of New	Registered Ager	nt
KIM, YONG H 18200 N.W. 7TH AVENUE MIAMI FL 33189				B2 Street Add	ress (P.O. Box Number is Not Accepta	ible)	
			Ī	84 Orty		FL 85	Zıp Code
NATURE _	Signature, types or protest Latter of registered age			gert s.g. atom require	ration submits this statement for the pi rd of directors. I hereby accept the api d when runsating! ADDITIONS/CHANGES TO OF	DATE	ECTORS IN 12
ET ADDRESS -S1-ZIP	KIM, YONG HO 18200 N W 7TH AVE MAMI FL	<u>—</u>	1.2 NAM 1.3 STR 1.4 City	ME EET ADDRESS Y-ST-ZIP		L (III	ange Astron
E E1 ADDRESS - ST-ZIP	VP KIM, KUNCHA 18200 N W 7TH AVE MIAMI FL	[] DELETE				[] Ch	ange 🔲 Addition
ET ADDRESS ST- ZIP		DELETE	1			☐ Ch	ange 🔲 Addition
T ADDRESS ST-ZIP		☐ DELETE	4. 1 111 4 2 NAN 4 3 STR	.£		☐ Ch	ange Addition
T ADDRESS ST-ZIP		☐ DEFELE	5 1 THI 52 NAN 53 SIR	E ME EET ADDRESS		Ch:	ange 🔲 Addition
ET ADDRESS ST-ZIP	,,,	[] DELETE	6 1 310 6 2 NAN 6 3 STR 6.4 CITY	ME EET ADDRESS '-ST-7IP	V	☐ Chi	
certify that footh; that I appears in I	the information indicated on this ani	rual report or supplemental and poration or the receiver or truste	nished and di nual report is se empowere	oes not qualify f	or the exemption stated in Section 118 te and that my signature shall have the s report as required by Chapter 607, F	a cama langi affant	t self made under