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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000060927 (8)

ANCHOR ENTERPRISES OF JENSEN BEACH, INC.

Principal Place of Business Mailing Address

1012 N.E. ARCHORAGE LN. 2440 JEROME AVE.
JENSEN BCH.. FL 34957 BRONX NY 10468-6401

FILED Feb 11 1997 8:00am Secretary of State



					 Date Incorporated or Qualified 08/15/1994 	3a. Date of Last Report 03/04/1996
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26					65-0529388	Not Applicable
Suite Apt. #, etc. Suite, Apt. #, etc. 22					Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Ζıp	Country Zip Co		Countr	Intry B. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30			Florida Statutes Yes No		
L	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	legistered Agent
B(ODEM, LOREN E		81	Name		
815 COLORADO AVE.				82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 305				Street Address (P.O. Box Number is Not Acceptable)		
STUART FL 34994				63		
י ישערש או נאוישוע			<u></u>			
l			84	Crty		FL 85 Zip Code
11. Persua	nt to the provisions of Sections 602.05	02 and 607.1508. Florida Statu	ites, the abov	re-named cor	poration submits this statement for the	
office c	nt to the provisions of Sections 602.05 or registered agent, or balls in the State Lam tangliar with, ancop the obli	of lorida. Such change was	authorized b	y the corpora	ation's board of directors. I hereby acc	ept the appointment as registered
agent	am tan har with, and accept the bold	raions or, Section 607.0505, F	-ionda Statute	8.		1/2/10-
SIGNATUR	A MARGON	ent and the it applicable (NC	TC: Proving As	nor eignahus ragu	pired when reinstating)	A DATE /3//7/
12.	OFFICERS AN	ND DIRECTORS	13.	or organization requ	ADDITIONS/CHANGES TO OFF	
TITLE	D	DELETE	1.1 TITLE			Change Addition
NAME	LEE, JOSEPH		1.2 NAME			
STREET ADDRES	A LAWESINE NO		4	T ADDRESS		
	VALHALIA NY 1059	~	1	}		
CITY-ST-ZIP TITLE	D 7/25/25/31	DELETE	1.4 CITY- 2.1 TITLE	31-20		Change Addition
NAME	KIM, CHAE O	E Siccie	2.7 NAME			
	AA LIPLIDY OF			* **********		
STREET ADDRES	FORT LEE NJ 07024		1	T ADDRESS		
CITY - ST - ZIF	D D	☐ DELETE	2. 4 C/TY	ST-ZIP		Change Addition
TITLE	=	נ_ טגנגונ	3.1 TITLE			Change C Addition
NAME	YANG, HOI K		3.2 NAME	i	•	
STREET ADDRES			1	r address'		
CHY-ST-7IP	WOODSIDE NY 11372	L DELETE	3.4 CITY-	SI-ZIP		Change Addition
TITLE	D D	ר"ו הנדנון:	4.1 TITLE			CT custifie CT vocition
NAME	LEE, JUNG C	•	4 2 NAME	ì		
SYREET ADDRES				T ADDRESS		
CITY-\$1-ZP	PALLISADES NJ	T 2222	4.4 CITY -	ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE	İ		Change Addition
NAME	KIM, BYONG S		5.2 NAME	1		
STREET ADDRES	1 1 1 1		53STREE	T ADDRESS		
Crty+St+7IP	BROOKLYN NY 11215		54 CITY-	ST-ZIP		
THIE	D	DELETE	61 TITLE]		Change Addition
NAME.	YUN, KANG YOO		6.2 NAME			
STREET AUDRES	ss 2 FOXHURST ST.		6.3 STREE	T ADDRESS		
CHTY-ST-ZIP	NEW HYDE PARK NY		6.4 CITY-	ST-ZIP		
					ed in Section 119.07(3)(i), Florida Statu	tes. I further certify that the

14. I do 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; the Lam en officer or director of the corporation or the receiver by distate empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or Corporation or the receiver by distance in a page 11 or Block 12 or Block 13 or Block 14 or Block 1

R OR DIRECTOR

(78)-733-496

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