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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P94000073849 (9)

DEE TAE KWON DO, INC.

Principal Place of Business

Mailing Address

FILED Jan 30 1998 8:00am Secretary of State



18245 NW 12TH ST. 18245 NW 12TH ST. PEMBROKE PINES FL 33029 PEMBROKE PINES FL 33029 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/03/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 17091 HW 170714 Suite, Apt. #, etc. 17081 NW 65-0547313 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing PROBREKE \$5.00 May Be ぴっそう REMBANK 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current fear Intangible 33027 BRUWARD 33027 30 BOWWAR 29 Personal Property Tax due June 30. ∏ No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DEE, CHRISTOPHER Name 18245 NW 12TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) **PEMBROKE PINES FL 33029** 83 84 City Zip Code 85 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. TITLE DELETE 1.1 TITLE Change Addition DEE, CHRISTOPHER NAME 12 NAME 18245 NW 12TH ST. STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition CHRISTOPHER. DEE NAME 2.2 NAME 18245 NW 12TH ST STREET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES 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 3.4. CITY-ST-ZIP DELETÉ TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Channe Addition NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition 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 supplied annual report of supplied annual report of supplied annual report of supplied annual report of the corporation or the report of 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 anactiment with an address.

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