2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P94000088897

1. Entity Name
HARMONY TAE KWON DO, INC.

Principal Place of Business	Mailing Address
726 S. PENNOCK LANE JUPITER, FL 33458 US	726 S. PENNOCK LN JUPITER, FL 33458 US

DO NOT WRITE IN THIS SPACE

02032007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0541222	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HWANG, KRISTINA
726 S PENNOCK LANE
JUPITER, FL 33458

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE_____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

| **FILE NOW!!! FEE IS $150.00**
After May 1, 2007 Fee will be $550.00 | **9.** Election Campaign Financing
Trust Fund Contribution. ☐ | **$5.00** May Be
Added to Fees | |

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	CAMPBELL, JAMES B
STREET ADDRESS	726 S PENNOCK LANE
CITY-ST-ZIP	JUPITER, FL 33458

TITLE	VP
NAME	KRISTINA HWANG
STREET ADDRESS	726 S PENNOCK LANE
CITY-ST-ZIP	JUPITER, FL 33458

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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04/06/07-80051-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   3-28-07   5617451230

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #