2001 UNIFORM BUSINESS REPORT (UBR) FILED Jan 30, 2001 8:00 am Secretary of State DOCUMENT # P95000011471 J. J. FINDINGS SUPPLY, INC. 01-30-2001 90086 004 ***150.00 Principal Place of Business Mailing Address 63 NE 1 ST 63 NE 1 ST MIAMI FL 33132 MIAMI FL 33132 LIS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0558368 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name <u>Jung Ja SUH</u> SUH, JUNG JA Street Address (P.O. Box Number is Not Acceptable) 8167 N. Savannah Circle 370 NW 111 AVE POMPANO BEACH FL 33071 City Zip Cade 8 Davie 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. Jung Ja Suh Jan. 8, 2001 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete Change TITLE SUH, JUNG J NAME NAME 8167 N. Savannah Circle 44 N MIAMI AVE STREET ADDRES STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Davie, FL 33328 MIAMI FL 33 128 STD TITLE ☐ Delete TITLE ☐ Addition SUH, WOO S NAME NAME

	GORAL SPRINGS FL 33071	STREET ADDRESS CITY-ST-ZIP	8167 N. Savannah Circle Davie, FL 33328
TITLE IAME STREET ADDRESS STY-ST-ZIP	,- □ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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maicaied	certify that the information supplied with this filing does not qualify for th on this report or supplemental report is true and accurate and that my	e exemption state signature shall he	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information ave the same legal effect as if made under oath; that I am an officer or director

or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Jung Ja Suh, Pres. 1/8/01 PED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR