## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P95000034095

1. Entity Name

YOUNG SAENG FREIGHT OF MIAMI, INC.



## FILED Mar 24, 2003 8:00 am Secretary of State

03-24-2003 90244 004 \*\*\*150.00

ABO NN 74TH AVE   ABO NN 74TH AVE   ABO NN 74TH AVE   ABO NN 74TH AVE   ABO								COD WE	100								
Suria, Apt. #. etc.   Check Herite II MAKING CHANGES	Principal Place of Business 4460 NW 74TH AVE MIAMI FL 33166 US			4460 NW 74TH AVE MIAMI FL 33166													
City & State  City & State  City & State  City & State  Country  C	2. Principal P	lace of Busine	ss	3. Mailing Address						1 1 1		4185 21111 1	0181 08111 7	IIIII IID)IID 11	11) 33881 00110		
Second   S	Suite, Apt.	Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES										
S. Name and Address of Current Registered Agent  S. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name   ILL JIN, JEONG  7001 N.W. 50TH ST  MAMIF R. 33166  Strock Address (P.O. Box Number of Not Acceptable)  ### DUBY THANK  FL   Zip Code 3-3166  City HIAM  FL   Zip Code 3-3166  City H	City & State	City & State					4. FEI Number			nber 6	<sup>*</sup> 65-0580373			<u> </u>			
Name   LL JIN JEONG	Zip	Zip Cour				try" " "		5 Cartificate of Status Desired 7 \$8.7									
ILL JIN, JEONG 7001 N.W. 50TH ST MIAMI FL 33186    Street Addresse (P.O. Box Number is Not Acceptable)	6. Name and Address of Current F				egistered Agent				7. Name and Address of New Registered Agent								
Street Address (PC. Box Number is Not Acceptable)							Name ILL JIN JEONG										
MAMIFE 33166    MIAM   FL   Zip Code   33166	ILL JIN, JEONG																
Enter Address Oth Strict Address	7001 N.W. 50TH ST										1.1	716	28 1 720				
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.    Mar 19   John	MIAMI FL 33166								446	ON.	W	14	AVE				
The colligations of registered agent.    SIGNATURE								-		_			-2				
SIGNATURE Signature, typeed or pretent name of registered agents and life if application. INOTE Registered Agent signature recoursed when reinstating)  FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  DIREL PAYABLE TO THE STATE TO THE STREET ADDRESS OFFICERS AND DIRECTORS IN 11  OFFICERS AND DIRECTORS IN 11  DIREL PAYABLE TO THE STREET ADDRESS OFFICERS AND DIRECTORS IN 11  OFFICERS AND DIRECTORS				the purp	ose of chang	ging its re	egistere	ed office or	register	ed age	ent, or l	ooth, in	the Stäte	of Floric	da. I am f	amiliar with,	and accept
SIGNATURE    FILE NOW!!! FEE IS \$150.00	the obligati	ions of registe	red agent.	0	1 4							A	In	19	ہد	203	Ì
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10.	SIGNATURE_	Signature, typed o	r printed name of registered agent a	and title if ano	dicable	(NOTE:	Registered	Agents tonate	re required	t when rei	instating)		-147	• • •			
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MAME STREET ADDRESS CITY-ST-2IP MIAM FL  JOENG, JIN ILL 7001 N.W. 50TH ST MIAM FL  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AV 27 DE FEB, #39., SUITE 312 SOTY-ST-2IP  CHOI, SOON E AVIET ADDRESS CITY-ST-2IP  CHOIL SOON E AVIET ADDRESS CITY-ST-2IP  CHOI, SOON E AVIET ADDRESS CITY-ST-2IP  CHOIL SOON	10.		OFFICERS AND	DIRECTO			11.			ADI	DITION	IS/CHA	NGES T	O OFFIC	ERS AND		
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		L certify that the	information supplied with	this filing	does not au	ualify for t			ted in Se	ection 1	119.070	3)(i), Flo	orida Sta	tutes. I fu	urther cert	ify 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:

SIGUALUKK KEKUIKED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 19 2003

305-718-9389

Daytime F

CR2E034 (10/02)