PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000074349

JK AND HK CORP.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90009 031 ***150.00



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Principal Place	e of Business	Mailing Address		** * *	1 (86)/66) ile ierer eint eent deut betti een deut eiteb tuit eitee	180 1881 ;	
1313 W BOYNTON BEACH BLVD 1313 W BOYNTON BEACH BI BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426			TAD				
201111011 021			•		DO NOT WRITE IN THIS SPACE		
	·			•	3, Date Incorporated or Qualified 09/26/1995	1	
2. Principal P	face of Business	2a. Mailing Address	·		4. FEI Number Applied	For	
21		26			65-0564725 Not Ap	plicable	
Suite, Apt.	#, etc.	Suite, Apt. #. etc.			\$8.75 Addit		
22	SAME	27			5. Certificate of Status Desired Fee Require	×	
City & Stat	(8)	City & State		-	6. Election Campaign Financing \$5.00 May		
23		28			Trust Fund Contribution Added to Fe	es	
Zip	Country	z Zip	Country ==	-	Personal Property Tax		
24	[25]		<u> </u>		Total Topers	NO	
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered Agent		
KIM	HONGLIN			1491118			
KIM, JONG-IN 11211 S MILITARY TRAIL #5022 BOYNTON BEACH FL 33436				Street Addr	dress (P.O. Box Number is Not Acceptable)		
DOTIVION DENOTIFE 30000			83		SAME	:	
ş.	•		1-1	City	FL 85 Zip Code		
11, Pursuant office or n	to the provisions of Sections 607.050; egistered agent, or both, in the State	2 and 607.1508, Florida Statutes of Florida. Such change was auti inns of Section 607.0505. Florid	the above-re horized by the	named corporation	oration submits this statement for the purpose of changing its regis on's board of directors. I hereby accept the appointment as register	stered red	
	in lenning, war, and accept the conge			Tal	15-11/ VIN 2000 1/7/99	· ,	
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOTE: R	egistered Agent s	Outputs codmiss	1 When revirstating) DATE	&	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I		
TITLE	DPS	□ DELETÉ	1.1 TITLE	1	. □ Change □] Addition 🚉	
NAME	KIM, JONG-IN	_	1.2 NAME			8	
STREET ADDRESS	1313 W BOYNTON BEACH BLY	ID .	1.3 STREET A		,	#	
CITY-ST-ZIP	BOYNTON BEACH FL 33426		1.4 CITY-ST-Z	7P	☐ Change ☐	Addition &	
TIFE 3	DT	☐ DELETE	2.1 TITLE	1		174001001	
NAME	KM, HWA	•	2.2 NAME				
STREET ADDRESS	11211 S MILITARY TRAIL #502	2	23 STREET AL	1			
- CITY-ST-ZSP.	BOYNTON BEACH FL 33436	DELETE	2.4 CITY-ST-	ZP	∵ Change □	Addition	
TITLE	,	CT DETEIR	3.1 TITLE 3.2 NAME	1	. Change C		
NAME				NODE CO.		}	
STREET ADORESS	•		3.3 STREET A	1			
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-	<u> </u>	☐ Change ☐	Addition	
NAME		_ OLLETE	4.2 NAME	ľ			
			4.3 STREET AL	Y DESC			
STREET ADDRESS			4.4 CITY-ST-Z				
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	-	☐ Change	Addition	
NAME			5.2 NAME	1			
STREET ADDRESS			5.3 STREET AL	ODRESS		1	
CITY-ST-ZIP			5.4 CITY-ST-2			-	
TITLE	<u> </u>	DELETE	6.1 TITLE		☐ Change ☐	Addition	
NAME			6.2 NAME	}			
STREET ADDRESS		•	6.3 STREET AC	DORESS		} ;	
CITY-ST-ZIP	•		64 CITY-ST-Z				

14. I hereby certify that the information supplied with this filling 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; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

C1/	2 64	ATI	ID	┏.