

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 13, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90061 030 \*\*\*150.00

**DOCUMENT # P95000074349**

1. Entity Name  
**JK AND HK CORP.**

Principal Place of Business: **1313 W BOYNTON BEACH BLVD BOYNTON BEACH FL 33426**  
 Mailing Address: **1313 W BOYNTON BEACH BLVD BOYNTON BEACH FL 33426-3402**

2. Principal Place of Business Suite, Apt. #, etc.  
 3. Mailing Address Suite, Apt. #, etc.

City & State  
 City & State

Zip Country Zip Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0564725** Applied For  Not Applicable

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

6. Name and Address of Current Registered Agent  
**KIM, JONG-IN**  
**11211 S MILITARY TRAIL #5022**  
**BOYNTON BEACH FL 33436**

7. Name and Address of New Registered Agent  
 Name: **KIM, JONG-IN**  
 Street Address (P.O. Box Number is Not Acceptable): **3306 BLACK OAK COURT**  
 City: **BOYNTON BEACH FL** Zip Code: **33436**

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.

SIGNATURE: (NOTE: Registered Agent signature required when reinstating)  
 DATE: **1/6/2000**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPS</b> <b>KIM, JONG-IN</b> <b>1313 W BOYNTON BEACH BLVD</b> <b>BOYNTON BEACH FL 33426</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D. P. S.</b> <b>KIM, JONG-IN</b> <b>3306 BLACK OAK COURT</b> <b>BOYNTON BEACH, FL 33436</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT</b> <b>KIM, HWA</b> <b>11211 S MILITARY TRAIL #5022</b> <b>BOYNTON BEACH FL 33436</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D. T.</b> <b>KIM, HWA</b> <b>3306 BLACK OAK COURT</b> <b>BOYNTON BEACH, FL 33436</b>
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13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DATE: **1/6/2000** DAYTIME PHONE #: **561-737-7805**

CR2E034 (9/99)