03-05-1999 90007 014 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

7. Corporation	MENT # P96000 ON CORPORATION	013005						
Principal Place	of Business	Mailing Address	-			1 (30)(43) (10 (8)(0 0)((1 03))(13	III 98 111 99101 11689 11111 8811	(4010 1 8111 1991
4661 NW 31ST AVE 4661 NW 31ST AVE								
TAMARAC FL 33309 TAMARAC FL 33309							-	
							TE IN THIS SPACE	
						 Date Incorporated or Qualifed 02/12/1996 		
2. Principal Pl	ace of Business	2a. Mailing Addr	ess			4. FEI Number	A	oplied For
21		26				65-0643374		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	, etc.			5. Certifcate of Status Desired		Additional
22		27					aw-	equired
City & State	е	City & State				6. Election Campaign Financing		May Be
23		28		<u> </u>		Trust Fund Contribution		to Fees
Zip	Country	Zip	r	Country		8. This corporation owes the curr	ent year Intangible Yes	□No
24	25	29	30			Personal Property Tax. 10. Name and Address of New F		
	9. Name and Address of Current	Registered Agent		81	Name	to. Name and Address of New F	(egistered Agent	<u>-</u>
FRIE	D, MARK E			01	Name			
2706 BRICKELL BAY OFFICE TOWER				82	Street Add	ress (P.O. Box Number is Not Accepta	able)	
1001 S BAYSHORE DRIVE				-			<u>.</u>	
MIAMI FL 33131			83					
MIMMI FE 00101				84	City		FL 85 Zip	Code
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligate standard or printed name of registered agent	ions of, Section 607.	USUS, FIORIDA S	statutes	•	poration submits this statement for the on's board of directors. I hereby accepted when reinstating)	of the appointment as n	egistered
12.	OFFICERS ANI			13.	a signature require	ADDITIONS/CHANGES TO OF		ORS IN 12
TITLE	D			1.1 TITLE			☐ Change	☐ Addition
NAME	CHO, JONG C			2 NAME				
STREET ADDRESS	8086 MIZNER LANE				ADDRESS			
1	BOCA RATON FL 33433			.4 CITY- S				
CITY-ST-ZIP TITLE	D			2.1 TITLE			☐ Change	☐ Addition
NAME	CHO, SEONG S		1:	2.2 NAME				
STREET ADDRESS	8086 MIZNER LANE			2.3 STREET	ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33433			2. 4 CITY-5				
TITLE	500/1121/011/2 05/05			3.1 TITLE			Change	☐ Addition
NAME				3.2 NAME		·		
STREET ADDRESS				3 STREET	ADDRESS			
CITY-ST-ZIP				3.4. CITY-S				
TITLE				.1 TITLE			☐ Change	. Addition
NAME				. 2 NAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				1.4 CITY-S				_
TITLE				5.1 TITLE		n' va	Change	Addition
1				,				
NAME				5.2 NAME				
NAME STREET ADDRESS				5.2 NAME	FADDRESS			
				5.2 NAME				. Addition

CITY-ST-ZIP 14. 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 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 or an attachment with an address with all the like empowered.

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS