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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # P96000013992

KO-AM COMMERCIAL, INC.

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90079 011 ***150.00



				<u> </u>	, <u>a</u> (1)(3 10)(6 10)(9 1)(1 100)
Principal Place	e of Business	Mailing Address			
118 S WESTSHORE BLVD. #141 TAMPA FL 33609		118 S WESTSHORE BLVD. #141 TAMPA FL 33609		,	
				DO NOT WRITE IN THIS SP	PACE
				3. Date Incorporated or Qualified 02/10/1996	
2. Principal P	lace of Business	2a. Mailing Address	1/ 1 ht.	4. FEI Number	Applied For
1		26 4532 W.	Kennedy Blu	⁴ 59-3360860	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
2		27 #	141	5. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28 Tampa t	- <i>L</i>	Trust Fund Contribution	Added to Fees
Zip	Country		Country	8. This corporation owes the current year Intang	gip te
4	25	29 33609 30		Personal Property Tax.	Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Age	ent
\ <u></u>			81 Name		
YOO, IN SANG			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	1
118 S WESTSHORE BLVD, #141			45	W. Kennedy Bla	1d #14/
TAM	PA FL 33609		83		
			84 City		85 Zip Code
				mpa FL	33609
 Pursuant office or re agent. I a 	to the provisions of Sections 607.0502 egistered agent, or both in the State of m familiar with, and accept the obligation	and 607.1508, Florida Statutes, the Florida. Such change was author his of, Section 607.0505, Florida S	ne above-named corp rized by the corporation Statutes.	oration submits this statement for the purpose of chan's board of directors. I hereby accept the appointm	anging its registered nent as registered
SIGNATURE	Signature, typed or printed name of registered agent a	Sd telescopies (NOTE: Roots	stered Agent signature requires	d when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D STREET		1.1 TITLE		Change
NAME	YOO, IN SANG		1.2 NAME		`
STREET ADDRESS	118 S WESTSHORE BLVD, #141		1.3 STREET ADDRESS	4532 W. Kennedy Blvd Tampa FL 3360	, # 141
	TAMPA FL 33609	i i	14 CITY-ST-ZIP	Tampa FL 3360	9 ' ' '
CITY-ST-ZIP TITLE	174411 74 1 E 00000		2.1 TITLE	75,00,00	Change Addition
			2.2 NAME		
NAME			2.3 STREET ADDRESS	The same of the sa	- عد د الب
STREET ADDRESS					
CITY-ST-ZIP			2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE			3.2 NAME	_	_ ,
NAME			1		
STREET ADDRESS			3.3 STREET ADDRESS		ļ
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Change Addition
TITLE		_	4. 2 NAME	_	
NAME					ļ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change
TITLE	•		5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		į
CITY-ST-ZIP			6.1 TITLE		Change Addition
TITLE				,	Targette Targette
NAME			6.2 NAME	·	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	<i>)</i>	.	6.4 CITY-\$T-ZIP		<u>.</u>

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 of an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND THEOUR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

2E034 (11/98)