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

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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000050040 (0)**1. Corporation Name

TIME IN ACTION, INC.

Principal Place of Business

FILED Jan 24 1997 8:00am Secretary of State

Date Incorporated or Qualified	3a. Date of Last Report

CORAL SPRING		11911 ROYAL PALM BY CORAL SPRINGS FL 3:	140: STE 15-1 2065-7376 DR	03				
(CORAL SPRINGS, FL 33065-3737			06/10/1996	3. Date Incorporated or Qualified 3a. Date of Last Report 06/10/1996			
2. Principal P	lace of Business	28. Mailing Address 26			4. FEI Number 65 - 066934	1	Applied For Not Applicable	
Suite Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	1 1	\$8.75 Additional Fee Required	
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	Country 25	Zτρ Country 29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Cu	irrent Registered Agent		81 Name	10. Name and Address of New Reg	jistered Agent		
	LEE, YOUNG	45 400 3 / 0 0 .		OI IVAILE				
	CORAL SPRINGS FL 33065				dress (P.O. Box Number is Not Acceptab	le)		
,	,	<i>,</i> .		83				
(-1			84 City		FL 85 Zip	p Code	
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508. Florida St	atutes, the al	nove-named cor	rporation submits this statement for the p		its registered	
office or r	registered agent, or both, in the time familiar with and accept the c	State of Florida. Such change w	as authorize	d by the corpora	ation's board of directors. I hereby accep	t the appointment a	as registered	
SIGNATURE	Many D	30 0	, i londid otal	utcs.	,	1/17/67		
SIGNATURE	Stursavire, typed or private harper of glyster	ed agent and me it applicable	(NOTE: Rogistere	d Agent signature requ	ulred when reinstating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12	
THE	PTD	☐ DELETE	11 T)	TLE		☐ Change	e Addition	
NAME	JAE LEE, YOUNG		1.2 N/	AME .				
STREET ADDRESS	11911 ROYAL PALM BLVD	***	1.3 \$1	REET ADDRESS				
CITY - ST - ZIP	CORAL SPRINGS FL 3306			TY-ST-ZIP			4.100	
TITLE	SO LEE CHEONO	L] OELETE	2.1 TI			Change	e L Addition	
NAME	JAE LEE, CHEONG	OTF 45 400	2.2 N/					
STREET ADDRESS	11911 ROYAL PALM BLVD			REET ADDRESS				
CCTY - ST - ZIP	CORAL SPRINGS FL 3306	DELETE		ITY-ST-ZIP		Change	e Addition	
TITLE		נייו הנוכונ	3.1 Tf	i		L. CHATIGE	, L. FAGULION	
NAME emera aponter			32 N/	REET ADDRESS				
STREET ADDRESS				ITY-ST-ZIP				
CITY ST-ZIP TITLE		DELETE	4.1 TI			Change	e 🔲 Addition	
NAME		end - series	4.2 N	i				
STREET ADDRESS				REET ADDRESS				
CITY-ST-ZIF				TY-ST-ZIP				
TITLE		DELETE	5 1 TI			Change	e 🔲 Addition	
NAME			5.2 N	AME				
STREET ADDRESS	•		5351	REET ADDRESS				
CITY - \$1 - ZIP			5.4 CI	TY-ST-ZIP				
TITLE		DELETE	6.1 TI	TLE		Change	e 🔲 Addition	
NAME			6 2 N	AME				
STREET ADDRESS			6.3 S	REET ADORESS				
CITY - ST- ZIP			6.4 C	TY-ST-ZIP				

14. If do hereby certify that the information supplied with this filing does not quality 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 oriector 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.

GNING OFFICER OR DIRECTOR