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

FILED Jan 29, 1999 8:00am Secretary of State

	1999	DIVISION OF C	- CORPORATIONS	01-29-1999 90050 008 ***150.00	
DOCU 1. Corporation	MENT # P96000	064043			
JAY YU	N CORP.			1	£ ***
1	1. 1913. 数型 1945. 2000			A HARMAN HE PROPERTIES ARMY RANGERSHI ERM	. ANDER ÉRRO I ar one arago por e rr o
Principal Plac	ce of Business	Mailing Address		T TO BELLE BY SIGN THE STATE OF STATE O	åttir eren åbny gradenty radi
704 S.W. BRO	ADWAY STREET	704 S.W. BROADWAY STRE	ET		1: 11 - 1
OCALA FL 344	175	OCALA FL 34475		DO NOT WRITE IN THIS	
}				3. Date Incorporated or Qualifed	SPACE
			•	07/31/1996	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3416810	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27 Site 8 State			Fee Required
City & Sta	te .	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation owes the current year Interest.	
24	25	<u></u>	30	Personal Property Tax.	∐Yes ∐No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent
071-		CONTAIN TO	81 Name	• '	
	RMER, ROBERT A N.E. 25TH AVENUE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	N.E. 23111 AVENUE NLA FL 34470				<u> </u>
00/	ENTE OFFICE		83		
	·		84 City		85 Zip Code
11 Principant	to the provisions of Sections 607 0503	2 and 607 1508 Florida Statute	s the above-named corno	PL	changing its registered
office or	registered agent, or both, in the State of	of Florida. Such change was au	thorized by the corporation	oration submits this statement for the purpose of n's board of directors. I hereby accept the appoi	ntment as registered
	in lamila, with, and accept the obligat	ions of, decitor dor.0000, thos	iua Statutes.		,
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature required	when reinstating), / DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D .	☐ DELET E	1.1 TITLE	17、35分别有数。2.	Change Addition
NAME	YUN, DOK S	•	1.2 NAME		ile i
STREET ADDRESS	704 S.W. BROADWAY STREET OCALA FL 34475	•	1.3 STREET ADDRESS		en ger
CITY-ST-ZIP TITLE	OCALA FE 34473	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	1,5 47 7	☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS	•	
CITY-ST-ZIP	j. 1741.7541%, 1741%,		2. 4 CITY-ST-ZIP		
TITLE STATE	28.879 (27.02.07. a)	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME 1	imentale vil 1965 Ministration in 1987		3.2 NAME		•
STREET ADDRESS	LA 70 Shall		3.3 STREET ADORESS	これでは、10億円をより、2003年間をより	
CITY-ST-ZIP		Doctor	3.4. CITY-ST-ZIP	20 4 1 2 4 3 4 4 5 4 4 5 4 5 4 5 4 5 4 5 4 5 4 5	
TITLE	•	☐ DELETE	4.1 TITLE	िया के जिल्ला है की उन्हें पर अधिक समित सम ित्	☐ Change ` : ☐ Addition
NAME:	<u>L</u>	And the second second	4. 2 NAME		
STREET ADDRESS	[5]	± 4	4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	anger de San	
STREET ADDRESS			5.3 STREET ADDRESS	•	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE	TOTAL DEL ELO MOSTO DEL ELOS DOS PEROSES EL ELOS DE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	TOP SML BROKET RECEIVED IN THE CONTROL OF THE CONTR	•	6.2 NAME		
STREET ADDRESS	No service of the ser		6.3 STREET ADDRESS		•
CITY-ST-7IP	į		6.4 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 on an attachment with an address, with all other like empowered.

SIGNATURE: DOUSIGNATURE OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR

1 - /3 - 7)
Date Daytime