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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 07 1997 8:00am

Secretary of State

A NECESSAL DE PARE AND AND MAIN MARK BALL ABOUT ASH INGLADAR SALA AND AND

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

STREET ADDRESS

SIGNATURE:

CITY - ST - ZIP

DOCUMENT # P96000067962 (6)

L'PATRICIA OF USA, INC.

Principal Piace 901 S. 60TH AV #260 HOLLYWOOD F	VE.	Mailing Address 901 S. 60TH AVE. #280 HOLLYWOOD FL 33023-6742			
				3. Date Incorporated or Qualified 08/15/1996	3a. Date of Last Report
	lace of Business FLAGUER ST	2a. Mailing Address	C	4. FEI Number 45-070/958	Applied For
Suite, Apt		26 4 W. FLAC Suite, Apt. #, etc.	766(-/		Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 MIAM	Country	28 M/B41, 72	Country		Added to Fees
24 33/3	. 	29 33/30	OBOZ	8. This corporation has liability for in Florida Statutes	Yes No
	9. Name and Address of Curren			10. Name and Address of New Reg	stered Agent
	, J on g H		81 Name		
1 '	S. 60TH AVE.		62 Street Add	ress (P.O. Box Number is Not Acceptable)
#260	0 LYWOOD FL 33023		63		
HUL	T1MOOD LT 33053				
			84 City	•	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named cor	poration submits this statement for the pu	roose of changing its registered
office or r agent. La	registered agent, or both, in the State im familiar with, and accept the obliga	of Floridal Such change was au dions of, Section 607,0505, <u>F</u> lor	ithorized by the corpora ida Statutes.	ition's board of directors. I hereby accept	the appointment as registered
SIGNATURE	- 10A 10A 1	21110 127			
	Signature, typical or for ted name of registeren age		Registered Agent signature requ		DATE
12.	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TITLE /	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	LEE, JONG H	X	128446	D. P.	
STREET ADDRESS	901 S 60 AVE, #260		1.3 STREET ADDRESS	SANG M. LEE	
CITY-SI-ZIP	HOLLYWOOD FL 33023		1.4 CITY - ST - ZIP	LW. FLAGLER ST	
TITLE		DELETE	2.1 TITLE	114MI, PC 33/30	Change Addition
NAME			2.2 NAME		** '
"STREET ADDRESS			2.3 STREET ADDRESS		
.CITY-ST-ZIP		DELETE	2. 4 CITY-ST-ZIP		Change Addition
TITLE			3.1 TITLE 3.2 NAME		CT CHANGE CT MODITION
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY - ST - ZiP			3.4. CITY-ST-ZIP		
TOLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
.STREET ADDRESS			4.3 STREET ADDRESS		
CHTY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	,	. Change Addition
.NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	5.4 CITY - ST - ZIP		Change Addition
TOLE NAME		F') nereit	6.1 TITLE 6.2 NAME		LT CHRUBE LT MORROLL

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. I do 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.