TILE NOW: FILING FEE A	FTER MAV 1 IS	25. <i>6</i> 0		
CORPORATION ANNUAL REPORT	FLORIDA DEPARTMENT OF STATE		FILED	
1997	DIVISION OF CO		97 APR - 1	AM 11: 56
DOCUMENT # P9600081159			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
K. H. VENDING CORPORATION			JALLARIAGO	ale, reonion
Principal Place of Business	Mailing Address			
2892 TENUIS CLUB DR. #205				
			DO NOT WRITE IN THIS SPACE	
WEST PALM BEACH, FL 334/7  2. Principal Place of Business   2a. Mailing Address			3. Date Incorporated or Qualific 9/27/96 4. FEI Number	d 3e. Date of Last Report
21 120 NEW LAKE DRIVE	26. Walling Address		APPLIED FOR	<u> </u>
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 BOYNTON BEACH, FL. Country	28	Country	Trust Fund Contribution  8 This correction has liability for	or intangible tax under S. 199.032,
24 33426 25 PALM BEACH	29	30]	Florida Statutes 🔎	/es [] No
9. Name and Address of Curren	l Registered Agent	81 Name	10. Name and Address of Nev	v Registered Agent
HO JEA KANG		B2 Street Addre	JEA KANG PSS (P.O. Box Number is Not Accep	lable)
2892 TENNIS CLUB	DRIVE, #205	83 /20	NEW LAKE D	
WEST PALM BEACH, I	a 334/7	<u>                                     </u>		Or To Oado
11. Pursuant to the provisions of Sections 607,050?  Or registered agent, or both, in the State of Floric familiar with, and accept the obligations of, Sections	and 607,1508, Florida Statutes, da. Such change was authorized	the above named corpor	N TON BEACH ation submits this statement for the d of directors. I hereby accept the a	FL 85 Zip Code 33/2.6 purpose of changing its registered office ppointment as registered agent. I am
SIGNATURE				
Signature, typod or printed name of registered agent  12. OF FICERS ANI		Flogistered Agent signature required 13.		FFICERS AND DIRECTORS IN 12
TITLE DPS			PS	Change [ Addition
NAME HO JEA KANG		1.2 NAME	o Jea Kang	
STREET ADDRESS 2892 TENNS CU	UB PRIVE, #20	1.3 STREET ADDRESS	/20	NEW LAKE DEIVE 2. 33426 Change Addition
TITLE WELL PACY BEAR	4, 16 354-17	2.1 Title	OYNTON BEACH, TO	Change Addition
NAME		2.2 NAME		
STREET ADORESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2.4 C/TY-S1 - 7/P		
TITLE	1	3.1 TITLE	A STATE OF THE PARTY OF THE PAR	Change Addition
NAME		3.2 NAME	800007	2 <b>1310885</b> 2/9701042006
STREET ADDRESS		3.3 STREET ADDRESS		2/3401042000 165.00 ***165.00
CiTY-S1-ZIP TITLE		3.4 CHY-S1-7IP 4.1 THUE	क्रानाम	Change Addition
NAME		4.2 NAM:		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 Ci1Y - ST - ZIP		
TITLE		5.1 TITLE		Change Addition
NAME *		5.2 NAMI		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY - ST - ZIP		
TITLE		6.1 111.15		Change Addition
NAME		62 NAME		

CITY-S1-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)/k). 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/97 56/-733-435-8 Dayline Prono #