

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000002127

1. Entity Name

LEOSCO USA, INC.

R

**FILED**  
**Sep 07, 2000 8:00 am**  
**Secretary of State**

09-07-2000 90064 026 \*\*\*150.00

Principal Place of Business

3201 N 74TH AVENUE  
SUITE #3  
HOLLYWOOD FL 33024  
US

Mailing Address

3201 N 74TH AVENUE  
SUITE #3  
HOLLYWOOD FL 33024  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0719242

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PARK, JONG C  
3201 N 74TH AVENUE  
SUITE 260  
HOLLYWOOD FL 33024

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible.  
Tax filing requirement and elects to do so.  
(See criteria on back)

**FILE NOW!!! FEE IS \$550.00.**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **P**  
STREET ADDRESS **PARK, JONG C**  
CITY-ST-ZIP **3201 N 74TH AVENUE STE 260**  
**HOLLYWOOD FL 33024**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Delete  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

LEOSCO USA, INC.  
12144 S.W. 50<sup>TH</sup> STREET  
COOPER CITY, FL 33330

TEL (954) 680-9729

AUGUST 30, 2000

DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

Re: Request for a waiver of penalty  
Document #: P97000002127

Dear sir or madam,

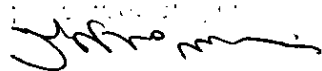
This is in request for a waiver of late filing penalty on our corporation's 2000 Uniform Business Report ("Report"). We did not realize the fact that we did not notify you the change of address, thus we did not file the report on or before May 1, 2000 until we received a second notice from you few days ago. We were not familiar with the laws of Florida, however, we understand that we may be allowed one time waiver. We have enclosed \$150.00 (fee for 2000) along with the report.

Also we have moved to a different location. The new address is:

12144 S.W. 50<sup>th</sup> Street  
Cooper City, FL 33330

Please update your record and waive late filing penalty if there is any. Contact us if you have any questions.

Sincerely,



Jong Choo Park  
President

Enclosure

Attachment doc #  
P97000002127  
A0075675