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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

,	1998	DIVISION OF CO	RPORATIONS	Scoretary or state
DOCUMENT # P9700005266 (6) KIM'S CARDS & STUFF, INC.				
				I I riahar a d a du ka baru ad ika dada baruk baruk baruk baruk baru adika diku duka diku baru da ba
Principal Place	of Business	Mailing Address		
,		5		
124 WEST PINE STREET #212		124 WEST PINE STREET #212		
ORLANDO FL 32801		ORLANDO FL 32801		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				01/15/1997
2. Principal Pl	ace of Business	2a. Mailing Address		4 FEI Number
21		26		59-3420086 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be
23		28	·	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 Name and Address of Current	29 3	0	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
- KIN	, YONG MEE	registaled Agent	81 Namo	
	WEST PINE STREET		82 Street	Address (P.O. Box Number is Not Acceptable)
#212			62 Sireer	Address (F.O. Box Number is Not Acceptable)
ORLANDO FL 32801			83	
			84 City	85 Zip Code
44 0	Manualisiana - 10-11-11-12-12-12-12-12-12-12-12-12-12-12-	007 4500 Florido Otal 400		▁ <u> </u>
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Elorida Statutes.				
_	m tamiliar with, and accept the obligati	ons of, Section 607.0505, Floring	ga Statutes. MK M	10 100
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (10 £ F		c required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D NIN YOUGHEE	☐ DEL ete	11 TITLE	L.J Change L.J Addition
NAME STREET ADDRESS	KIM, YONG MEE 124 W PINE ST, #212		1.2 NAME 1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32801		1.4 CITY - ST - ZIP	
TITLE		☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CiTY-ST-ZIP	<u> </u>	Delete	2. 4 CiTY - ST - ZIP	
TITLE NAME		☐ DELETE	3.1 TITLE 3.2 NAME	Change Addition
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY+\$T-ZIP		T DELETE	4.4 CITY - ST - ZIP	Character T Add State
TITLE		DELETE	5 1 TITLE 5 2 NAME	Li Change Li Addition
STREET ADDRESS	•		5.3 STREET ADDRESS	1
CITY-ST-ZIP			5.4 City-ST-ZIP	
TITLE	•	☐ DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	0.11.0.

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 this 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 in an attachment with an address.

FILED

Jan 22 1998 8:00am

Secretary of State