

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90147 045 \*\*\*150.00

0023513

**DOCUMENT # P97000024407**

1. Entity Name  
**K.B.R.S., INC.**

Principal Place of Business      Mailing Address  
**7902 N.W. 36TH STREET**      **5040 N.W. 93 DORAL PLACE**  
**MIAMI FL 33166**      **MIAMI FL 33178**  
**US**

**00012256**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

4. FEI Number **65-0741295**      Applied For  
 Not Applicable

Zip      Country      Zip      Country      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

**LE THI HIEN KIM**  
**5040 N.W. 93 DORAL PLACE**  
**MIAMI FL 33178**

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 *Le Kim*      DATE 1-13-01  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  **FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	DPST			<input type="checkbox"/>	Delete
	LE THI HIEN KIM	5040 N.W. 93 DORAL PLACE	MIAMI FL 33178		
	VP			<input type="checkbox"/>	Delete
	STEELE, BRETT	9533 S DIXIE HWY	MIAMI FL 33156		
	VP			<input checked="" type="checkbox"/>	Delete
	STEELE, RICHARD	9533 S DIXIE HWY	MIAMI FL 33156		
	VP			<input type="checkbox"/>	Delete
	KIM, SUNG	7902 NW 36TH ST #12	MIAMI FL 33166		
	VP			<input type="checkbox"/>	Delete
	KIM, MIN	5040 NW 93 DORAL PL	MIAMI FL 33178		
	VP			<input type="checkbox"/>	Delete
	KIM, SAM	7902 36TH ST #12	MIAMI FL 33166		
	VP			<input type="checkbox"/>	Delete
	VP			<input type="checkbox"/>	Change
	VP			<input checked="" type="checkbox"/>	Addition
	VP			<input type="checkbox"/>	Change
	VP			<input type="checkbox"/>	Addition

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: *Le Kim (Le Kim)*      DATE: 1-13-01      DAYTIME PHONE: (305) 593-9910  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (10/00)