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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P97000037307 (0)

NEW PARIS, INC.

FILED Feb 03 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 500 NW 24TH STREET 500 NW 24TH STREET MIAMI FL 33127 MIAMI FI 33127 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1997 2. Principal Place of Business 2a. Mailing Address Applied For 748076 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WAN LEE KEUN sang 1N00. ZN 500 NW 24TH STREET Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33127 .1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept to 507.0505, Florida Statutes. Pursuant to the provisions of Soffice or registered agent, or agent, i am familiar with and a soft agent. cept the obligations of, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ DELETE 1.1 TITLE TITLE WOO, Joung Hee 1.2 NAME CR2E034 NAME 3611 COLLINS AVE. #309 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33140 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE WOO, SANG IN IN WOO. SANG-NAME 2.2 NAME 3611 COLLINS AVE. #309 STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33140 2. 4 CITY+ST-ZIP CITY-ST-ZIP PL DELETE Change Addition TITLE 31 TITLE NAM LEE, KEUN NAME 3.2 NAME 3611 COLLINS AVE. #309 3.3 STREET ADDRESS STREET ADDRESS MIAMFBEACH-FL-33140 CiTY-ST-ZIP 3.4. CITY - ST - ZIP ☐ DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$T - ZIP __ DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TETLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 suppliemental annual report if 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 employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 to charged, or on an attachment with an address.

SIGNATURE:

SIGNATURE

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