## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 FILED May 17, 1999 8:00 am **PROFIT** FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 05-17-1999 90060 039 \*\*\*150.00 DIVISION OF CORPORATIONS 1999 DOCUMENT # P97000037307 1. Corporation Name NEW PARIS, INC. / Mailing Address Principal Place of Business 500 NW 24TH STREET MIAMI, FL 33127 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/25/97 4. FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0748076 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 sans Zυ WOO. FEUN NAM LEE Street Address (P.O. Box Number is Not Acceptable) 500 NW-24TH-STREET MIAMI, FE-33127 83 City mo Com? 84 Zip Code ns of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered for both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered and accept the obligations of Section 607.0505, Florida Statutes. Pursuant to agent. Laj SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE Change ٠.,٤ 1.1 TITLE PRESIDENT-1.2 NAME アとい出くロン 1,41,4 JEOUNG-HEE-WOO 13 STREET ADDRESS STREET ADDRESS 3611-COLLINS AVE-#309-<u>011 - 31 - ZIP</u> 1.4 CITY-ST-ZIP MIAMI BEACH, FL 33140 Addition 2 1 TITLE $f(\tau_{i_0})$ -VICE-PRESIDENT -SANG IN WOO... -3611-COLLINS-AVE-#309 In WOODST 22 NAME 1.4ME 2.3 STREET ADDRESS BIRFET ADORESS 2. 4 CITY-ST-ZIP MIAMI BEACH, FL-33140 ☐ Addition DELETE 3 1 TITLE SECRETARY 3 2 NAME 1,49% KEUN-NAM-LEE 3.3 STREET ADDRESS 3611 COLLINS AVE-#=309 MIAMI BEACH, FL 33140 34. CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE \_NAME 4.3 STREET ADDRESS FIREFIADORESS 4 4 CITY-ST-ZIP DELETE ☐ Change Addition 51 TITLE 5.3 STREET ADDRESS -18921 NOTE: 35 ( 5.4 CITY-ST-ZIP ☐ DELETE 61 TITLE ☐ Change Addition

14 Thereby cenify that the information supply with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information to a rate on this annual report or supply fiental 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 other or connector of the corporation of the receiver or truster empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in 5-oc. 12 ct Block 15 if changed or on all attachment with an address, with all other like empowered.

62 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE

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