## 2004 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

		1071					1211 127		
DOCUMENT # P97000056719					».		L 12	1.8	
1. Entity Name							E PHILE	, 40	
CHON'S FOOD MART, INC.						OL NOV 15 PM 12: 48  SECRETARY OF STATE TALL AHASSEE FLORIDA			
					7	ar is	. OF 8	TAIL	
							COPTAINS FI	OKIN	
Principal Place of Business Mailing Address						St	TATASSEL.		
929 N DIXIE HWY   Lake Worth, Fl 33460						47			
EARL HORITI, IL 33400 US									
Principal Place of Business     3. Mailing Address									
12443 80th Lane North   12443 80th Lane North									
Suite, Apt.	Suite, Apt. #, etc.	3uite, Apt. #, etc.			11042004 Chg-P CR2E034 (10/03)				
City & State		City & State			4. FEI Numb			Applied For	
'	alm Beach. FL.	West Palm Beach. FL.			65-076		<del></del> -	Not Applicable	
Zip	Country			nirv			£0.75 ·	······	
33409	USA	33409	USA	<u>,</u>	5, Certificate	of Status Desired	Fee Requi		
	- 6. Name and Address of Current Registered Agent				7. Name and	Address of New R	egistered Agent		
CHON, BONG S MYUNG, SUN, CHON									
0						er is Not Acceptable	3)		
( 323 I4 DIVIC 1144 I					3 80th Lane North				
	,								
				City			Zip Co	ode -	
				West I	<u>Pàlm Beac</u>		<u> </u>	09	
	e named entity submits this statement for	or the purpose of changing	its register	ed office or reg	gistered agent, or bo	th, in the State of Ro	orlda. I am familiar witi	h, and accept	
the obligations of registered agent.									
SIGNATURE MUJOS GALLEN									
Signature, typout in princed name of registered agont and title if applicable. (NOTE: Registered Agont signature required whon reinstatung) DATE									
9. Election Campaign Financing \$5.00 May Be									
Am	ended AR is \$61.25	Trust Fund Co			Added to Fees			ŀ	
10	OFFICERS AND DIRECTORS 1					CHANGES TO OFF	ICERS AND DIRECTO		
TITLE	DPS  Delete			; 4	PST		XX. Change	: Addition	
NAME STREET ADDRESS	CHON, BONG S 929 N DIXIE HWY 57				MYUNG SUN 12443 80t		anth	ĺ	
CITY-ST-ZIP							FL. 33409	ĺ	
ΠTLE	Delete TI				MESC FAIN	Deach,	Change		
NAME		La Doiete	NAM	•			Change	Addition	
STREET ADDRESS				EET ADDRESS					
CITY-SI-ZIP	C			'-ST-ZIP				1	
TITLE	☐ Delate TitlE						- Change	Addition	
HAME.	MA MA				69	JUU42	754206 007 -**70	-00	
STREET ADDRESS	i D				11/15	7U4U1968		ן ** *********************************	
C/TY-ST-ZIP			CITY	'- ST- ZIP					
TITLE		☐ Delete	TITL				Change	☐ Addition	
NAME			NAM	- I					
STREET ADDRESS CHY-S1-ZIP	1			EET ADDRESS '- S1-ZIP				\	
<u> </u>		77			<del></del> .				
HILE			, III.				☐ Change	e 🗌 Addition	
NAME STREET ADDRESS			NAM STRE	EET ADDRESS					
CITY-ST-ZIP	1			r-ST-ZIP					
TITLE	Delete 1111.			·		☐ Change	Addition		
NAME		1J DOGG	NAM	1			· · · · · · · · · · · · · · · · · · ·	- La redition	
STREET ADDRESS				EET ADDRESS	To a			- 1	
CHY-SI-ZIP	1		CITY	'- ST- ZIP				ŀ	
12. 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 eath; 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 10 or Block 11 if									
changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE: 1/6/04 56/-792-9728 SIGNATURE: Distance OF SIGNING OFFICER OF DIRECTOR  Distance Phone #									
SIGNATURE: 100/100 CAN SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR Date Department of Date Date Date Date Date Date Date Date								, / 20]	
	SIGNATURE AND TIPED ON	# OF SIGNING UPING	ALT UN MICC			Date	Osyume mons		