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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Stale DIVISION OF CORPORATIONS

P97000059629 (0) DOCUMENT

B. KANG FOOD MARKET INC

Principal Place of Business Mailing Address 8001 OLD HWY 87 6001 OLD HWY 37 LAKELAND FL 33811 LAKELAND FL 33811

FILED Jan 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/07/1997 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3457236 26 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country $Z_{\rm ID}$ 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo KIM, CHAN S 6001 OLD HWY 37 Street Address (P.O. Box Number is Not Acceptable) 82 LAKELAND FL 33811 83 City Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 1006 President Chan Soo Kim NAME 1.2 NAME 6001 Old Hwy 37 Lakeland, FL 33811 STREET ADDRESS 1.3 STREET ADDRESS 1.4 CITY-ST-7IP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TUTUE 2.2 NAMI. NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - 7IP DELETE 3 1 THTLE Change Addition TITLE 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE TIFLE 4.1 TOLE Change Addition 4. 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition 5.1 THLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CHTY-ST-ZIP 6.4 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 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 the 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 on an attachment with an address.

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