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

NAME

STREET ADDRESS

SIGNATURE

Block 12 or Block 13 if changerd, or on an attachment with an address.

CITY-ST-ZIP

FILED **PROFIT** Apr 23 1998 8:00am FLÖRIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P97000075369 (3) DONNA KIM COMPANY, INC. Principal Place of Business Mailing Address 680 LAVERS CIRCLE, #111 680 LAVERS CIRCLE. #111 DELRAY BEACH FL 33444 DELRAY BEACH FL 33444 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1997 Principal Place of Business
1000 J. FEDERAL HWY 2a. Mailing Address Applied For W5-074199 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc \$8.75 Additional SUITE A Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing DELRAY BEACH 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30.//// Yes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TINGCANG-KIM, DONNA 680 LAVERS CIRCLE, #111 82 Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33444** 83 84 City 85 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. I hereby accept the appointment as registered agent, I am familiar with, and recept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signalure required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 13 THE NAME SOTTILE, PAT 1.2 NAME 7491 S. FEDERAL HWY, C-5 #153 13 STREET ADDRESS STREET ADDRESS BOCA RATON FL 33487 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE TINGCANG-KIM, DONNA M NAME 2.2 NAME 680 LAVERS CIRCLE, #111 STREET ADDRESS 2.3 STREET ADDRESS **DELRAY BEACH FL 33444** CITY-ST-ZIP 2. 4 CITY - ST - ZIP Addition TITLE 3 1 TITLE CUSTODIO, MADELINE 32 NAME NAME 12955 HAGEN RANCH ROAD STREET ADDRESS 3.3 STREET ADDRESS **BOYNTON BEACH FL 33437** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 THLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-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 TITLE 6.1 TITLE

6.2 NAME

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 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 withy an address.

6.3 STREET ADDRESS