

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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthem
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000088452 (2)

1. Corporation Name

FLORIDA V GEN MALL CORP.

99 MAY 17 AM 11:47

STATE OF FLORIDA



Principal Place of Business

200 BISCAYNE BLVD.
WAY #108
MIAMI FL 33131

Mailing Address

200 BISCAYNE BLVD.
WAY #108
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1455 NW 107th Ave.

Suite, Apt. #, etc.

956

City & State

Miami, FL

Zip

33172

Country

USA

2a. Mailing Address

1455 NW 107th Ave.

Suite, Apt. #, etc.

956

City & State

Miami, FL

Zip

33172

Country

USA

3. Date Incorporated or Qualified

10/14/1997

4. FEI Number

65-0790449

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

8. Name and Address of Current Registered Agent

PARK, HYON SIN
200 BISCAYNE BLVD.
WAY #108
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

John Shin

82 Street Address (P.O. Box Number is Not Acceptable)

1455 NW 107th Ave. #956

83

84 City

Miami

FL

85 Zip Code

33172

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and this is acceptable

(NOTE: Registered Agent signature required when reinstating)

DATE

2. OFFICERS AND DIRECTORS

TITLE President
NAME James Park
STREET ADDRESS 20505 S. Dixie Hwy, Suite 805
CITY-STATE-ZIP Miami, FL 33189-1217

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

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CITY-STATE-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

President
John Shin
1455 NW 107th Ave., #956
Miami, FL 33172

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

000002892463
-06/02/99-01048-
****550.00

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

☐ Change ☐ Addition

14. 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/99

Date

Daytime Phone # 0182610

CR2004 (10/97)

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007
50.00