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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000093658 (7)

CEDAR FINANCIAL SERVICES, INC.

Principal Place of Business Mailing Address 2880 N. WICKHAM ROAD 2880 N. WICKHAM ROAD APT 809 DO NOT WRITE IN THIS SPACE MELBOURNE FL 32935 MELBOURNE FL 32935 3. Date Incorporated or Qualified 10/30/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3476512 Not Applicable Suite, Apl. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 Cilv & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intang ble 29 Personal Property Tax due June 30. []] Yes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name UNG, OON SOO 2880 N. WICKHAM ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **APT 809** 83 **MELBOURNE FL 32935** 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. (NOTE Registered Agent signature requi when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE 1 1 TITLE Change Addition TITLE UNG, OON SOO NAME 1.2 NAME **CR2E034** 2880 N. WICKHAM ROAD, APT 809 STREET ADDRESS 1.3 STREET ADDRESS **MELBOURNE FL 32935** CITY ST ZIP 14 CITY - ST - ZIP DELETE 21 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TITLE 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME

CITY-ST-7IP 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 supplied with this lining does not quality for the example stated in Section 1990 (S)(f), Fiorida Statutes. Intrinsic Certify that the mioritatic indicated on this annual report or supplied with 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.

ON SOO LINES.

ON SOO LINES.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST-ZIP

5.1 TITLE 52 NAME

6.1 TITLE

6.2 NAME 63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

NAME

TITLE

DELETE

DELETE

OOH SOO WHY

3/16/98

(407) 254 7642

Change

Change

Addition

Addition

FILED

Mar 23 1998 8:00am

Secretary of State