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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P97000099014 (7)

FILED Feb 11 1998 8:00am Secretary of State

SOL	ID GOLD DISCOUNT, INC.	• •					
Principal Pla	ice of Business	Mailing Address			-{	I EDHU (DIN DOLL)	
18200 NW 27 AVE #39 MIAMI FL 33056		18200 NW 27 AVE #39 MIAMI FL 33056		DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified 11/20/1997		
	Place of Business	2a. Mailing Address			4. FELNumber		plied For
21	• # -1-	26]			65-0796605		ot Applicable
Suite, Ap	ι #, θiG. •	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 . Fee Ro	
City & Sta	ato	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28		<u>-</u>	Trust Fund Contribution	Added	
Zip	Country	Zip	Country		8. This corporation owes or has paid the c		
24	25 g. Name and Address of Currer	29 30	<u> </u>		Personal Property Tax due June 30. 10. Name and Address of New Registered		No
	LEE, HYUN B		81	Name	IN. HEIRE SHE NEW TONIESS OF HER HOUSELDS	- Waitt	
	18200 NW 27 AVE #39					<u>.</u>	
MAMI FL 33056			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
			83				
			84	City		85 Zip	Code
			1	•	F(<u> </u>	
11. Pursuan	it to the provisions of Sections 607 050 registered agent, or both, in the State	32 and 607.1508. Florida Statutes, e of Florida. Such change was auth	the above	-named corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing it	s registered registered
agent. I	am familiar with, and accept the oblig	ations of, Section 607.0505, Florid	a Statutes).	on a board of an obtaine. Thorough according to	pontanon uo	· · · · · · · · · · · · · · · · · · ·
SIGNATURE		ce_					
12.		ent and title if applicable (NOTE R	egistered Age	nt signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	OC IN 12
TITLE	PSD	DELETE	1.1 TITLE		ADDITIONAL ANGLES TO OFFICERS AF	Change	Addition
NAME	LEE, HYUN B	- · · ·	1.2 NAME	ĺ		_ •	
STREET ADDRESS	8840 NW 50 DR		1.3 STREET	ADDRESS	•		
CITY - ST - ZIP	CORAL SPRINGS FL 33065	5	1.4 CITY-ST-ZIP				
TITLE	PSD					Change	Addition
NAME		LEE, YANG R					ļ
STREET ADDRESS			2.3 STREET ADDRESS				
City-St-ZIP	CORAL SPRINGS FL 33065		2. 4 CITY - ST - ZIP				A 1 PS -
TITLE			3.1 TITLE			☐ Change	☐ Addition
NAME OTREET ADDRESS	· L		3.2 NAME	*PDDCCC			ļ
STREET ADDRESS	' [3 3 STREET	· !			ľ
CITY-ST-ZIP TITLE			3.4. CITY - S 4.1 TITLE	11 - ZIP		Change	Addition
NAME	1		4 2 NAME				
STREET ADDRESS	;		4 3 STREET	ADDRESS			1
City-St-ZIP			4.4 CITY - S				
TITLE		☐ DELETE	51 TITLE			Change	Addition
NAME		İ	5.2 NAME				
STREET ADDRESS	: [5.3 STREET	ADORESS			}
CITY-\$1-ZIP			5.4 CITY-S	T-ZIP			
TITLE	: I		6.1 TITLE			Change	Addition
NAME	1		6 2 NAME				
STREET ADDRESS							
CITY-ST-ZIP	; <u> </u>		6.3 STREET 6.4 CITY-S	1			1

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:

1 sympholice

1-25-98

2E034 (10/97)