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

FILED Mar 13 1998 8:00am Secretary of State

<u> </u>	1998	1900	DIVISION OF C	JOHPORATI	ONS	
1	MENT # P9700				() c	at a
	IVAL-MALL INC. MAI	44	l, Inc.	•	1.26.	2. to
Bringing Place	on of Rusinana	Mailing	ddroco			militare communities to he
Principal Place of Business Mailing Address				DAV #14		
2928 N. STATE ROAD 7. BAY #14 2928 N. STATE ROAD 7. LAUDERDALE LAKES FL 33311 LAUDERDALE LAKES FL						
						DO NOT WRITE IN THIS SPACE
ŧ						3. Date Incorporated or Qualified
		- 1 - 52-0				12/02/1997
	Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For Not Applied For Not Applied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					SR 75 Additional	
22 27					6. Certificate of Status Desired Fee Required	
	City & State City & State			······································		6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zíp	Country	Zip		Country		8. This corporation owes or has paid the current year Intangible
24	25 9. Name and Address of Curre	29	Amont	30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
1.0	EE, CHANG GIL	in riogistator	- gont	81	Name	
	321 BL ACK OLIVE DRIVE					
	AMARAC FL 33321			82	Street	et Address (P.O. Box Number is Not Acceptable)
				83		
				84	City	85 Zip Code
				04	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607, 150	8, Ftorida Statut	es, the above	e-named	ed corporation submits this statement for the purpose of changing its registered
agent. Fa	am familiar with, and accept the oblig	gations of Secti	on 607:0505, Flo	orida Statute	S.	orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	6 67 62	200	(110)	r p		March 5, 1998 Ure required when reinstating) DATE
12.	Signature, and or printer-mone of registered agent and title if applicable (NOT OFFICERS AND DIRECTORS		13.			
TITLE	DPT DELETE		1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
rame	LEE, CHANG GIL		1.2 NAME		[3	
STREET ADDRESS	8321 BLACK OLIVE DRIVE		1.3 STREET	ADDRESS	s <u>[</u> [
CITY-ST-ZIP			1,4 CITY - S	T-ZIP		
TITLE	DS AFF CEUA-		L DELETE	2.1 TITLE		Change Addition C
NAME ATRICT ADDRESS	and the first of the profession		2.2 NAME 2.3 STREET	4000000	LEE, SEI JA	
STREET ADDRESS	TAMARAC FL 33321			2.3 STREET		
CITY-ST-ZIP TITLE	**************************************		DELETE	3.1 TITLE	01-4IF	Change Addition
NAME			=	3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	s
CITY-ST-ZIP	<u> </u>			3.4. CITY - 5		
TITLE			DELETÉ	4.1 TETLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET		s
CITY-ST-ZIP			Deserve	4.4 CITY-S	T-ZIP	
TITLE	1		DELETÉ	5.1 TITLE		800002457468 Addition
NAME						
DIDECT ADDRESS			_	5.2 NAME	4000500	-03/16/9801005019
STREET ADDRESS				5.3 STREET		80000245745 Addition -03/16/98-01005-019 ***150.00
CITY-ST-ZIP						-03/16/9801005019 ***150.00 Change All Addition
CITY-ST-ZIP TITLE			☐ DELETE	5.3 STREET 5.4 CITY-S		***150.00
CITY-ST-ZIP				5.3 STREET 5.4 CITY-S 6.1 TITLE	1-ZIP	Change Addition
CITY-ST-ZIP TITLE NAME				5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME	ADORESS	Change Addition

IA. 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 early; that I am an officer or director of the corporation or the receiver of 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 of an affactment with an address.

March + 1998 /900717-209