

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90311 028 ***150.00

DOCUMENT # P97000107139

1. Entity Name
FARM, OH SUNG GROUP, INC.

Principal Place of Business

**4004 SIOUX CIRCLE
 JACKSONVILLE FL 32259**

Mailing Address

**10916 ATLANTIC BLVD
 1A
 JAX FL 32225**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

4401 EMERSON STREET

Suite, Apt. #, etc.

SUITE 8

City & State

JACKSONVILLE FL

Zip

32207

Country

DUVAL

4. FEI Number

59-3491484

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

HAN, YU D. S CPA

10916 ATLANTIC BLVD., #1A

JACKSONVILLE FL 32225

7. Name and Address of New Registered Agent

Name

HAN, Yu D. CPA

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

4401 EMERSON STREET SUITE 8

City

JACKSONVILLE

FL

Zip Code

32207

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Yu D. HAN

4/25/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **HA, BYEONG S**
 STREET ADDRESS **4004 SIOUX CIRCLE**
 CITY-ST-ZIP **JACKSONVILLE FL 32259**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPST** ☒ Change ☐ Addition
 NAME **HA, BYEONG S.**
 STREET ADDRESS **4004 SIOUX CIRCLE**
 CITY-ST-ZIP **JACKSONVILLE FL 32259**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Byeong Sung Ha

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/02

Date

904

Daytime Phone #

CR2E034 (9/01)