

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 17, 1999 8:00 am**  
**Secretary of State**

05-17-1999 90079 014 \*\*\*150.00

DOCUMENT # P98000018141 ✓

1. Corporation Name

Best CHOICE Food STORE, INC.  
1620 Stockton Street

Principal Place of Business

Mailing Address

1620 Stockton St  
JAX, FL 32210

PO Box 16952  
JAX, FL 32245-6952

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2-16-98

4. FEI Number

59-3524720

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

1620 Stockton St

2a. Mailing Address

PO Box 16952

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2

27

City & State

JAX, FL

City & State

JAX

4

25

Country

USA

29

30

Country

USA

9. Name and Address of Current Registered Agent

Youn Suk Yang  
1620 Stockton Street  
JAX, FL 32210

10. Name and Address of New Registered Agent

81 Name

Youn Suk Yang

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

1620 Stockton Street

83

84 City

JAX

FL

85 Zip Code

32210

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
<input type="checkbox"/> DELETE	<u>Pres.</u>	<u>Youn Suk Yang</u>	<u>1620 Stockton Street</u>
<input type="checkbox"/> DELETE	<u>Vice Pres.</u>	<u>Young C Kwak Yang</u>	<u>1620 Stockton Street</u>
<input type="checkbox"/> DELETE	<u>Secretary</u>	<u>SU Gi Kwak</u>	<u>1620 Stockton Street</u>
<input type="checkbox"/> DELETE	<u>Treasurer</u>	<u>Kwang C Kwak</u>	<u>1620 Stockton Street</u>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1, 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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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, with all other like empowered.