2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
04-26-2001 90085 010 ***150.00

DOCUMENT # P98000032863

1. Entity Name
LOTTE ORIENTAL MARKET, INC.

Principal Place of Business	Mailing Address
1425 WEST OAKRIDGE ROAD ORLANDO FL 32809	1425 WEST OAKRIDGE ROAD ORLANDO FL 32809

50037541

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3505291 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KANG, JUN
~~4651 OAK HAVEN~~
~~APT # 201~~
~~ORLANDO FL 32839-3187~~

3066 Eaglet Lp.
Orlando, FL 32837

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 ______________________________
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, 2001 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS KANG, JUN 4651 OAK HAVEN # 201 ORLANDO FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 3066 Eaglet Loop Orlando FL 32837	☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP KANG, SOOK 4651 OAK HAVEN # 201 ORLANDO FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	 3066 Eaglet Loop Orlando FL 32837	☑ Change ☐ Addition
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CR2E034 (10/00)

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: Jun Mook Kang
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (407) 855-0992 Daytime Phone #