PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000041140

D.J.E., INC.

Principal Place of Business

Mailing Address

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90083 008 ***150.00



2928 NORTH STATE ROAD 7 #2023 LAUDERDALE LAKES FL 32311		2928 NORTH STATE ROAD 7 #2023 LAUDERDALE LAKES FL 32311				DO NOT WE		IS SPACE		
						3. Date Inco	rporated or Qualife 1998	d 		
2. Principal P	ace of Business	2a. Mailing Address				4. FEI Num	per - 02/21/	•	⊢	plied For
21		26 8840 NW SOTHDFIVE			1e	65-	0834715			t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate	of Status Desired		\$8.75 / Fee Re	1	
City & State	9	City & State		71			Campaign Financing	¹ 🗆	\$5.00	· · · · · · · · · · · · · · · · · · ·
23		 	149	> 1 5	_		d Contribution		Added	to Fees
Zip 24	Country 25		30 8	ROWKR		Personal	oration owes the cu Property Tax.		Yes	Χuο
	9. Name and Address of Current	Registered Agent		04 1		10. Name ar	d Address of New			
CHU	CANDY H			81 Name	•	SECI	< T	YOUN		
CHO, SANDY H 2928 NORTH STATE ROAD 7 #2023						s (P.O. Box N	umber is Not Accep			
	DERDALE LAKES FL 32311		}	83	884	<u>.o </u>	1. w. 50	<u>тн 1</u>) RIVE	
D.O.	SCHEALE BAKES LE SESTI			63						
				84 City	(oR	Δi	SPRINGS	F	85 Zip	3065
	to the provisions of Sections 607.0502			01/0 00000						
office or r	egistered agent, or both, in the State o	of Florida. Such change was aut	tnonzea	by the corp	poration	s board of dir	ectors. I hereby acc	ept the app	ointment as re	gistered
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	da Statu	ites.						
SIGNATURE		Ja jun	5	Eú (C	<u>T.</u>	TO CIV	PRESIDE	J'T DATE	2/24/	<u>*1</u>
12	Signature, typed or printed name of registered agent OFFICERS ANI		13.	Agent Signature	1 tedoli eo w		S/CHANGES TO O			
12.	PSD	DELETE	1.1 TIT	 LE		7,007,107	<u> </u>		Change	☐ Addition
	YOON, SEOK T		1.2 NA							
NAME	8840 NW 50TH DRIVE			REET ADDRESS						
STREET ADDRESS	CORAL SPRINGS FL 33065			Y-ST-ZIP	1					
CITY-ST-ZIP TITLE	CORAL OF MINOS I E 30000	☐ DELETE	2.1 TIT		1				Change	Addition
			2.2 NA		1					
NAME				REET ADDRESS			"			
STREET ADDRESS				TY-ST-ZIP	1					
CITY-ST-ZIP		☐ DELETE	3.1 TIT						Change	Addition
TITLE			3.2 NA		İ				-	
NAME				REET ADDRESS						•.
STREET ADDRESS				TY-ST-ZIP	"					
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TIT		 		_ _		☐ Change	Addition :
NAME			4, 2 NA		1					
STREET ADORESS			1	REET ADDRESS	,					
				Y-ST-ZIP					•	
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TIT						☐ Change	Addition
NAME.			5.2 NA	ME				•		
STREET ADDRESS			5.3 ST	REET ADDRESS	s					
CITY-ST-ZIP			5.4 CJ1	ry-ST-ZIP						
TITLE		☐ DELETE	6.1 TIT						☐ Change	Addition
NAME			6.2 NA	ME					•	
			63 ST	REET ADDRESS	s					
STREET ADDRESS				Y+ST-ZIP	}					

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, with all other like empowered.

SIGNATURE: