

2001 UNIFORM BUSINESS REPORT (UBR)

009460 AV

DOCUMENT # P98000075247

1. Entity Name

KIM'S ORIENTAL IMPORTS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT -4 PM 2:30

Principal Place of Business
1207 N.E. 163RD STREET
NORTH MIAMI BEACH FL 33162

Mailing Address
1207 N.E. 163RD STREET
NORTH MIAMI BEACH FL 33162

2. Principal Place of Business
1251 N.W. 165th Street
Suite, Apt. #, etc.

3. Mailing Address
1251 N.W. 165th Street
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Miami, Florida
Zip
33169
Country
U.S.A.

City & State
Miami, Florida
Zip
33169
Country
U.S.A.

4. FEI Number 65-0860831

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOOSANG, KIM
1207 N.E. 163RD STREET
NORTH MIAMI BEACH FL 33162

Name
David S. Kim
Street Address (P.O. Box Number is Not Acceptable)
1251 N.W. 165th Street
City
Miami FL Zip Code
33169

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

SIGNATURE

David S. Kim

David S. Kim

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

(NOTE: Registered Agent signature required when relinquishing)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
DOOSANG, KIM
1207 N.E. 163RD STREET
NORTH MIAMI BEACH FL 33162 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
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CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSD
David S. Kim
1251 N.W. 165th Street
Miami, FL 33169 ☐ Change ☐ Addition

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

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

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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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

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:

David S. Kim

David S. Kim

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

305-949-5458

Daytime Phone #

CR2E034 (5/01)

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