

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

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

05-17-1999 90048 017 ***150.00

**PROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # **P98000077527**

1. Corporation Name

Kim's Jewelry, Inc.

Principal Place of Business

Mailing Address

2155 W. Colonial Dr. 2155 W. Colonial Dr.
Orlando FL 32804 Orlando, FL 32804

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

9/2/98

4. FEI Number

59-3533123

Applied Fee
Not Applicable

\$8.75 Additional
Fees to be paid

\$5.00 May be
Added to Fee

5. Certificate of Status Desired ☐

6. Election Campaign Financing
Trust Fund Contribution ☐

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

Sung Kim
609 Sabal Lake Dr #201
Longwood, FL 32779

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Section 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent in bulk to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment of the new agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

12.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D.P.S.T
Sung Kim
609 Sabal Lake Dr #201
Longwood, FL 32779

D.V.P
Chong Ae Kim
368 NW 112th Ave.
Coral Springs, FL 33071

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/99
(407) 426-8202