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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Apr 10, 2003 8:00 am Secretary of State P98000095526 DOCUMENT # 04-10-2003 90118 024 ***150.00 1. Entity Name 212 VISION GROUP, INC. Principal Place of Business Mailing Address 8000 NW 31 STREET BAY 11 8000 NW 31 STREET BAY 11 MIAMI FL 33122 MIAMI FL 33122 2. Principal Place of Business 3. Mailing Address 2878 NW 79 AVE 2878 NW 79 AVE Suite, Apt. #, etc. Suite, Apt. #, etc. X-CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For FL 65-0880718 Miami Miami Not Applicable Country VSA \$8.75 Additional 5. Certificate of Status Desired 33122 33172 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KIM. SUK M Street Address (P.O. Box Number is Not Acceptable) 2878_NW 79 8000 NW 31 STREET BAY 11 MIAMI FL 33122 Miami 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. I am familiar with, and accept the obligations of registered agent. 137 Signature, typed or printed name of registeries igent and title if appear FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Addition NAME NAME KIM, SUK M 2878 NW 79 AVE STREET ADDRESS 8000 NW 31 STREET BAY 11 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Miami, FL 33122 MIAMI FL 33122 ☐ Delete ☐ Addition TITLE GMGR TITLE Change Change NAME NAME DEALEJO, REMBERTO P 2878 NW 79 AVE STREET ADDRESS STREET ADDRESS 8000 NW 31ST BAY 11 Milami, FL 23122 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33122 ☐ Change TITLE ☐ Delete TITLE **X**\Addition Kim, Kwang N NAME NAME 2878 NW 79 AVE STREET ADDRESS STREET ADDRESS FL 33122 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ... ☐ Delete Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. Thereby 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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