

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

02-26-2003 90123 003 ***150.00

DOCUMENT # P99000064618

1. Entity Name
COVER MASTERS, INC.



Principal Place of Business
% COVER MASTERS, SUNG MUN INVESTMENT
1180 SPRING CENTRE S. BLVD., #208
ALTAMONTE SPRINGS, FL 32714

Mailing Address
9892 MONCLAIR CIR
APOPKA FL 32703

2. Principal Place of Business
2155 W. Colonial Dr
Suite, Apt. #, etc.
#1102

3. Mailing Address
Suite, Apt. #, etc.

City & State
Orlando Florida
Zip
32804 Country
USA

City & State
Zip
Country

4. FEI Number
59-3587396

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

HUN, SUNG
1180 SPRING CENTRE S. BLVD SUITE 208
ALTAMONTE SPRINGS FL 32714

Name
DONG SUN HYUN
Street Address (P.O. Box Number is Not Acceptable)

9892 Montclair Cir
City
Apopka FL Zip Code
32703

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDT SHIN, HI HEE ☒ Delete
4892 MONTCLAIR CIR
APOPKA FL 32703

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
F/D DONG SUN HYUN ☐ Change ☒ Addition
9892 Montclair Cir
APOPKA, FL 32703

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

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

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

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

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/03

(407) 445-4445

Date

Daytime Phone #

CR2E034 (10/02)