2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 07, 2004 08:00 AM Secretary of State

DOCUI 1. Entity Nam TDK, INC		34			20020	, J	_
Principal Place 802 INGRAHA HAINES CITY,	AM AVENUE	Mailing Address 802 INGRAHAM ÄVENUE HAINES CITY, FL 33844	35				
6	O NOT WRITE	IN THIS SPA	CE	04032004 4. FEI Numbe 59-360	9605	CR2E034 (1	0/03) Applied For Not Applicable 75 Additional
	5. Name and Address of Current Re	reistavad Acent		5. Certificate	of Status Desired		Required
FLORES, I 443 JORD #203 APOPKA,	BYUNG AN STUART CIR				NOT W THIS SP		
	named entity submits this statement for ti ions of registered agent. Signature, typed or proted name of registered agent and		ered office or register		th, in the State of Flo	rida. I am familia	ar with, and accept
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00			.00 May Be led to Fees	U00000 04/07/04-4	104924 30004-004	150.00
10.	OFFICERS AND D	RECTORS					akakhnadan o
NAME STREET ADDRESS CITY-ST-ZIP	KIM, TAE D 8638 EDGE O WOODS CT ORLANDO, FL 328194138						
TITLE NAME STREET ADDRESS CITY-ST-ZP	PDST FLORES, BYUNG 443 JORDAN STUART CIR #203 APOPKA, FL 32703						regard at study as a survey or one
ISTLE NAME STREET ADDRESS CITY-ST-ZIP				elebritary est eleberate est est est eleberate de la constant de l	NOT W	radono s rajones rejumpo por par i	
HTLE NAME STREET ADORESS CITY-ST-ZIP				IN .	THIS SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						Man Jahasiaan	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							axadeianggaaaaa
12. I hereby indicated of the co-	certify that the information supplied with the certify that the information supplied with the contribution or the receiver or trustee empoyer, or on an attachment with an address, with the contribution of the certific trustee.	his filling does not qualify for the e rue and accurate and that my sig- vered to execute this report as rec th all other like empowered.	xemption stated in S nature shall have the julred by Chapter 60	ection 119.07(3) same legal effe 7. Florida Statut	(i), Florida Statutes. I of as if made under c es, and that my name	further certify the path; that I am are appears in Blo	nat the information n officer or director ck 10 or Block 11 if