

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 11 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S63623**

(0)

1. Corporation Name

K.S. EXPORT CORPORATION

Principal Place of Business

**102 SE 1ST STREET
MIAMI FL 33131**

Mailing Address

**K. S. EXPORT CORPORATION
7365 SOUTHWEST 129TH STREET
MIAMI FL 33131
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/28/1991

3a. Date of Last Report

08/12/1994

4. FEI Number

65-0270218

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 5 N E 1st Ave

2a. Mailing Address

26 5 N.E. 1st Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MIAMI - FLORIDA

City & State

28 MIAMI - FL

Zip Country

24 33132 25 DADE

Zip Country

29 33132 30 DADE

9. Name and Address of Current Registered Agent

**CHOI, KYONG SOO
102 SE 1ST STREET
MIAMI FL 33131**

81 Name

K. S. EXPORT CORP. VIVA BRASIL

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

5 N.E. 1st Ave

83

84 City

MIAMI

FL

85 Zip Code

33132

10. Name and Address of New Registered Agent

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

SIGNATURE

Signature (typed or printed name of registered agent or officer if applicable)

KYONG - SOO CHOI

(NOTE: Registered Agent Signature required when reinstated)

DATE

4-1-1995

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CHOI, SOOK JA
STREET ADDRESS	7365 SW 129 ST
CITY - ST - ZIP	MIAMI FL
TITLE	VSD
NAME	CHOI, KYONG SOO
STREET ADDRESS	7365 SW 129 ST
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or biennial annual 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 registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an amendment with an address.

SIGNATURE: **D**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KYONG - SOO CHOI

DATE

4/1/95 (305) 358-8009