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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V67556**

1. Corporation Name

ORANGE MOBIL, INC.

Principal	Place	of	Business

Mailing Address

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90015 042 ***150.00



1900 S ORANGE / ORLANDO FL 3280		1900 S ORANGE ORLANDO FL 32				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed 09/30/1992	
2. Principal Plac	e of Business	2a. Mailing Add	Iress			4. FEI Number Applied For	
· ·		26				59-3143772 Not Applica	ble
Suite, Apt. #,	etc.	Suite, Apt. 1	t, etc.			5. Certifcate of Status Desired S8.75 Additiona Fee Required	I
City & State		City & State	•			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country 25	Zip 29	Go:	intry		8. This corporation owes the current year Intangible Personal Property Tax.	-
····	9. Name and Address of Cur			Τ		10. Name and Address of New Registered Agent	
CHANG	S, SUNG SOOK			81	Name		
	ORANGE AVE			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
ORLAN	IDO FL 32806			83			
				84	City	FL 85 Zip Code	

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 and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D DELETE	1.1 TITLE	☐ Change ☐ Addition		
NAME	CHANG, SUNG SOOK	1.2 NAME			
STREET ADDRESS	1900 S ORANGE AVE	1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP			
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition		
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP		2. 4 CITY-ST-ZIP			
TITLE	☐ DELETE	3.1 TITLE	Change Addition		
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition		
NAME		4. 2 NAME			
STREET ADORESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	DELETE	5.1 TITLE	☐ Change ☐ Addition		
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition		
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-\$T-ZIP		6.4 CITY-ST-ZIP			
14 I hereby	pertify that the information supplied with this filing does not qualify for the	e exemption stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information		

indicated on this annual report or supplied with this minig does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Intumer carrier that the information indicated on this 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 receiver 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 attachment with an address, with all other like empowered.