


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2007 08:00 AM
Secretary of State

DOCUMENT # F80570 1. Entity Name PANKOR INVESTMENTS, INC.	
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Principal Place of Business 10404 BIT AND SPUR LANE POTOMAC MD 20854	Mailing Address 10404 BIT AND SPUR LANE POTOMAC MD 20854
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E034 (10/06)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LEE, CHANG GUN 964 RIVER EDGE COURT LONGWOOD FL 32779		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	State: FL Zip Code:

4. FEI Number NO-T APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	YIM, YEUW S
STREET ADDRESS	14800 HOOVER STREET
CITY - ST - ZIP	WESTMINSTER CA 92683
TITLE	P <input type="checkbox"/> Delete
NAME	SHIN, SI W
STREET ADDRESS	6451 SOUTHWING CL
CITY - ST - ZIP	COLUMBIA MD 21044
TITLE	V <input type="checkbox"/> Delete
NAME	PARK, JOO S
STREET ADDRESS	10404 BIT AND SPUR LANE
CITY - ST - ZIP	POTOMAC MD 20854
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	U00000641779
STREET ADDRESS	03/01/07-80014-012 150.00
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____ *2-15-2007* *301-221-4961*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #