## **FILED** 2006 FOR PROFIT CORPORATION ANNUAL REPORT\_\_\_\_ May 01, 2006 08:00 AM Secretary of State DOCUMENT # P01000022652

1. Entity Name K77 ENTERPRISES, INC.		÷	
Principal Place of Business	Mailing Address		
535 S. SUNDANCE DRIVE LAKE MARY, FL 32746	535 S. SUNDANCE DRIVE LAKE MARY, FL 32746		

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Principal Place 535 S. SUND LAKE MARY, I	ANCE DRIVE	Mailing Address 535 S. SUNDANCE DRIVE LAKE MARY, FL 32746				
KIM, HAES	6. Name and Address of Current Re SOOK NDANCE DRIVE RY, FL 32746		CE	04282006  4. FEI Numbe 59-370  5. Certificate	Na Chg-P	CR2E034 (11/05)  Applied For Not Applicable  \$8.75 Additional Fee Required
the obligat	named emity submits this statement for ti ions of registered agent.	ne purpose of changing its register	red office or reg	pistered agent, or bot	th, in the State of Flo	rida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and	title it applicable. (NOTE: Register)	ed Agent signature re	quind when reinstating)	1/0000	DATE
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Fina     Trust Fund Contribution		\$5.00 May Be Added to Fees	05/13/06	0550416 -90061-003 150.00
10.	OFFICERS AND D	RECTORS	Į			
title Name Street address City-St-Zip Title	D,P KIM, HAESOOK 535 S. SUNDANCE DRIVE LAKE MARY, FL 32746					
NAME STREET ADDRESS GITY-ST-ZIP						
TITLE NAME STRECT ADDRESS CITY-ST-ZIP					NOT W	
TUTLE NAME SKITCET ADDRESS C)TY-ST-IP				IN T	THIS SF	PACE
Title Name Street address City-St-Eip						
TITLE NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 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 it 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 507, 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:

CITY-ST-ZIP

STANDURE AND TYPED OR PRINTED HAME OF SIGNOIS OFFICER OR CIRCLION