

## **Secretary of State** Statement of Information

(California Stock, Agricultural Cooperative and Foreign Corporations) 5

IMPORTANT — Read instructions before completing this form.

Fees (Filing plus Disclosure) - \$25.00;

Copy Fees - First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)

ILUX Enterprise, Inc.

3. Business Addresses

SI-550

FILED Secretary of State State of California

APR n 2 2020

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2. 7-Digit Secretary of State File Number

C4261324

|  | Street Address of Principal Executive Office - Do not list a P.O. Box 20657 Golden Springs Drive Suite 101 |           |             |   | City (no abbreviations)  Diamond Bar | State<br>CA |                   |        |
|--|--|-----------|-------------|---|--------------------------------------|-------------|-------------------|--------|
| b. Mailing Address of Corporation, if different than item 3a  20657 Golden Springs Drive Suite 101   |  |           |             |   | City (no abbreviations) Diamond Bar  | State<br>CA | Zip Code<br>91789 |        |
| c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box  |  |           |             | P.O. Box                                | City (no abbreviations)              | State CA    |                   |        |
| 4. Officers  The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered. |  |           |             |   |                                      |             |                   |        |
| a. Chief Executive Officer/<br>Hwan Shik   | First Name   |           | Middle Name |   | Last Name<br>Yoon                    |             |                   | Suffix |
| Address<br>20657 Golder  | n Springs Drive  | Suite 101 |             |   | City (no abbreviations) Diarnond Bar | State<br>CA | Zip Code<br>91789 |        |
| b. Secretary<br>Hwan Shik  | First Name   | į         | Middle Name |   | Last Name Yoon                       |             | ·                 | Suffix |
| Address<br>20657 Golde   | n Springs Drive  | Suite 101 |             |   | City (no abbreviations) Diamond Bar  | State<br>CA | Zip Code<br>91789 | *      |
| c. Chief Financial Officer/<br>Hwan Shil   | First Name<br>(  |           | Middle Name |   | i.ast Name<br>Yoon                   | •           |                   | Suffix |
| Address<br>20657 Golder  | n Springs Drive  | Suite 101 |             |   | City (no abbreviations) Diamond Bar  | State<br>CA | Zip Code<br>91789 |        |
| 5. Director(s)  California Stock and Agricultural Cooperative Corporations ONLY: Item 5a: At least one name and address must be listed. If the Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions).   |  |           |             |   |                                      |             |                   |        |
| a First Name<br>Hwan Shik  | (  |           | Middle Name |   | Last Name<br>Yoon                    |             |                   | Suffix |
| Address<br>20657 Golder  | n Springs Drive  | Suite 101 |             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | City (no abbreviations)  Diamond Bar | State<br>CA | Zip Code<br>91789 | . , ,  |
| b. Number of Vacancies on the Board of Directors, if any   |  |           |             |   |                                      |             |                   |        |
| 6. Service of Process (Must provide either Individual OR Corporation.)   |  |           |             |   |                                      |             |                   |        |
| INDIVIDUAL - Complete Items 6a and 6b only. Must include agent's full name and California street address.  |  |           |             |   |                                      |             |                   |        |
| a California Agent's First Name (if agent is <b>not</b> a cornoration) Middle Name Last Name   |  |           |             |   |                                      |             |                   | Suffix |

7. Type of Business

David

Describe the type of business or services of the Corporation

1201 S. Beach Blvd.,

**Business Management Consulting** 

b. Street Address (it agent is not a corporation) - Do not enter a P.O. Box

8. The Information contained herein, including in any attachments, is true and correct.

Suite 205 CORPORATION - Complete Item 6c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) - Do not complete Item 6a or 6b

Hwan Shik Yoon

President

City (no abbreviations)

La Habra

State

Zip Code

90631

Chun