2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR).

## FILED Jan 25, 2007 08:00 AN Secretary of State DOCUMENT # J57177 1. Entity Name STEVE'S HOUSE OF KARATE, INC. Principal Place of Business Mailing Address 10016 GRIFFIN RD 10016 GRIFFIN RD COOPER CITY FL 33328 COOPER CITY FL 33328 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt #, etc Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-2778419 Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSENTHAL, STEVEN 10016 GRIFFIN RD Street Address (P.O. Box Number is Not Acceptable) COOPER CITY FL 33328 Zip Code FL 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 Signaturu, typed or printed name of registered agent and title i applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2007 Fee Will Be \$550,00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. HHIDelete HH 📋 Change Addition ROSENTHAL, STEVEN NAM NAM *LIONIOOOEO41*066 10016 GRIFFIN RD SERFET ADDRESS STREET ADDRESS 01/29/07-80039-001 150.00 FORT LAUDERDALE FL 33328 CHY SI AP CITY ST ZIE Im Defete HILE Change Addition 🔲 NAME NAM STREET ADDRESS SIRELL ADDRESS CHE ST ZIP CITY ST ZIP Delete Change ☐ Addition THEF HITE NAMB NAM STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST ZIP ☐ Delete ш 🔲 Change Addition NAME NAME STREET ADDRESS SIBLE LADDRESS CITY ST ZIP CITY SE ZIP Delete Change Addition ШU NAME NAME SIRCELADORESS STREET ADDRESS CITY ST ZIP CBY SEZIP IIILE Delete HIRE Change Addition NALE NAME STREET ADDRESS STREET ADDRESS CHY-SI-78P CATY SI-7IP

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 eath, that I am an efficiency 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 tike empowered.

SIGNATURE:

\*\*The Containing the containing true and the containi