2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008245

Entity Name: UNITED STATES AIKIDO ASSOCIATION, INC.

FILED May 08, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2011 W. SPRING CREEK PARKWAY 1725 OAK SPRINGS PLACE SUITE 1500 LAKE MARY, FL 32746

PLANO, TX 75023

Current Mailing Address: New Mailing Address:

2281 CRYSTAL FALLS DR. PO BOX 951862 FRISCO, TX 75034 PO BOX 951862 LAKE MARY, FL 32746

FEI Number: 20-5374682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GONZALEZ, ALEXANDREA E

1725 OAKE SPRINGS PLACE
LAKE MARY, FL 32746 US

BETANCOURT, NICOLAS PRES
1725 OAK SPRINGS PLACE
LAKE MARY, FL 32746 US

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.

SIGNATURE: NICOLAS BETANCOURT 05/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:P () DeleteTitle:P (X) Change () AdditionName:GONZALEZ, ALEXANDREAName:BETANCOURT, NICOLASAddress:1725 OAK SPRINGS PLACEAddress:1725 OAK SPRINGS PLACECity-St-Zip:LAKE MARY, FL 32746City-St-Zip:LAKE MARY, FL 32746

Title: () Delete Title: (X) Change () Addition Name: MORENO, MICHAEL Name: GONZALEZ, ALEXANDER E Address: 2281 CRYSTAL PALMS Address: 1725 OAK SPRINGS PLACE City-St-Zip: FRISCO, TX 75034 City-St-Zip: LAKE MARY, FL 32746

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALEXADER E GONZALEZ VP 05/08/2008