

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90498 046 ***150.00

DOCUMENT # P00000073324

1. Entity Name
KARATE AMERICA, INC.

Principal Place of Business
**4317 N. PINE ISLAND RD.
 SUNRISE FL 33351**

Mailing Address
**4317 N. PINE ISLAND RD.
 SUNRISE FL 33351**

BU116804



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number **65-1046867**

Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EXUM, JOHN
4317 N. PINE ISLAND RD.
SUNRISE FL 33351

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D EXUM, JOHN 4317 N. PINE ISLAND RD. SUNRISE FL 33351	<input type="checkbox"/> Change <input type="checkbox"/> Addition	/
<input type="checkbox"/> Delete	D BRAUN, TONY 4317 N. PINE ISLAND RD. SUNRISE FL 33351	<input type="checkbox"/> Change <input type="checkbox"/> Addition	/
<input type="checkbox"/> Delete	/	<input type="checkbox"/> Change <input type="checkbox"/> Addition	/
<input type="checkbox"/> Delete	/	<input type="checkbox"/> Change <input type="checkbox"/> Addition	/
<input type="checkbox"/> Delete	/	<input type="checkbox"/> Change <input type="checkbox"/> Addition	/
<input type="checkbox"/> Delete	/	<input type="checkbox"/> Change <input type="checkbox"/> Addition	/

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED JOHN EXUM**

Date **4/25/02** Daytime Phone # **954 572-7970**

CR2E034 (9/01)