

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020645

FILED
Jan 21, 2004
Secretary of State

Entity Name: UNIFIED TAE KWON-DO OF FLORIDA, INC.

Current Principal Place of Business:

11 S. WASHINGTON STREET
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

11 S. WASHINGTON STREET
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 02-0554025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RACKI, SEAN
11 WASHINGTON ST
ORMOND BCH, FL 32174 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RACKI, SEAN
Address: 11 WASHINGTON ST
City-St-Zip: ORMOND BCH, FL 32174

Title: VAS () Delete
Name: RACKI, SCOTT
Address: 11 S. WASHINGTON STREET
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: RACKI, SEAN
Address: 11 WASHINGTON ST
City-St-Zip: ORMOND BCH, FL 32174

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEAN RACKI

DP

01/21/2004

Electronic Signature of Signing Officer or Director

_____ Date