

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morlharr
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000012215 (6)

1. Corporation Name

U.S. TAEKWONDO COLLEGE, INC.



Principal Place of Business

Mailing Address

2303 SE FEDERAL HWY
STUART FL 34994

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STUART FL 34994

3. Date Incorporated or Qualified

02/10/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 2303 SE Fed. Hwy

26 U.S. Taekwondo

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Stuart, FL

27 2303 SE Federal Hwy

City & State

City & State

23 34994

28 Stuart, FL

Zip

Zip

25 U.S.A.

29 34994

30 U.S.A.

4. FEI Number

65-0564934

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

KANG, STEVEN D
2303 SE FEDERAL HWY
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name Kang, Steven D.
82 Street Address (P.O. Box Number is Not Acceptable) 104 SE Sailfish Ln.
83 Stuart, FL
84 City FL 85 Zip Code 34996

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the, if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

Steven Kang president 7-5-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	KANG, STEVEN D	
STREET ADDRESS	2303 SE FEDERAL HWY	
CITY- ST- ZIP	STUART FL 34994	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven Kang

Date

Daytime Phone #

7-5-96 (407)288-2468

CR2E034 (12/95)