


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 06, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000038173  
 1. Entity Name  
 JIU-JITSU SELF-DEFENSE SYSTEMS, INC.



Principal Place of Business 3165 NE 163RD STREET NORTH MIAMI BEACH, FL 33160	Mailing Address 3165 NE 163RD STREET NORTH MIAMI BEACH, FL 33160
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01252006 No Chg-P CRZE034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0833879	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 GLAUSER, STUART H  
 14446 WEST DIXIE HWY  
 MIAMI, FL 33161

**DO NOT WRITE IN THIS SPACE**

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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROBERTSON, JAMES 3940 NE 168 ST NORTH MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VALENTE, PEDRO 9601 COLLINS AVE., #506 BAL HARBOUR, FL 33154
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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000000421467  
 02/16/06-80038-004 150.00  
**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Pedro Valente 1/12/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #