2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Feb 02, 2005
Secretary of State

DOCUMENT# P03000157600

Entity Name: ELITE MARTIAL ARTS ACADEMY, INC

Current Principal Place of Business:

1730 S. PINELLAS AVE
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

1730 S. PINELLAS AVE
SUITE A & B
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 52-2409421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EMERY, GINGER A
1116 EAST OAKWOOD STREET
TARPON SPRINGS, FL 34689 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: GINGER A. EMERY

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: EMERY, GINGER A
Address: 1116 EAST OAKWOOD STREET
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: VP ( ) Delete
Name: ALEMAGHIDES, NICHOLAS
Address: 6531 THICKET TRAIL
City-St-Zip: NEW PORT RICHEY, FL 34653 US

Title: S ( ) Delete
Name: MANDELOS, ANDREAS
Address: 3343 ROCK VALLEY RD
City-St-Zip: HOLIDAY, FL 34691 US

Title: T ( ) Delete
Name: ELIO, JOSEPH T
Address: 5324 CEDAR LANE
City-St-Zip: NEW PORT RICHEY, FL 34654 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GINGER A. EMERY P 02/02/2005

Electronic Signature of Signing Officer or Director Date