LIMITED LIABILITY COMPANY

FILED May 05, 2003 8:00 am Secretary of State

UNIFURM BUSINESS REPURT (UDK)					05-05-2003 92166 015 ****55.00	
DOCUMENT # L02000018093 1. Entity Name Goju-Kai Karate-Do of Florida, LLC						
	DO NOT WRIT	ara High Maria - part Elli.	CARD HARLEST AND AND AND ADDRESS.			
2. Principal Place of Business 3. Mailing Address 4640 NW 7th St. 4640 NW 7th St.			St.			
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>	<u></u>	DO NOT WRITE IN THIS SPACE	
City & State City & State Miami Miami					4. FEI Number 06-1639874	Applied For Not Applicable
Zip 33144	Zip Country Zip 33144		Coun	itry		5.00 Additional e Required
				7. Name and Address of Current Registered Agent		
DO NOT WRITE IN THIS SPACE				Name Reyes, Jorge L. Street Address (P.O. Box Number is Not Acceptable)		
				4640 NW 7th St.		_
				City Miami FL		Zip Code 33144
SIGNATURE	Signature, typed or printed name of registered aga		FEE IS ayable to FI DUE BY	orida Departme	DATE IN Of State	
9.	MANAGING MEME					
NAME STREET ADDRESS CITY-ST-ZIP	MGRM Hicho, Amido 4640 NW 7th Miami, FL 33	n St,	., ***. 1 8	Sparate Color of Sparate Spar		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		702	E12(122)112(20)	IN THIS SPACE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		90., i 1.,		

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE SIGNATURE OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #