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

**PROFIT** CORPORATION **ANNUAL REPORT** 



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

1996

DOCUMENT # 1. Corporation Name J63835

(9)

ELITE	TAE KWON DO INSTITUTE	E INC								
Principal Place	of Business	Mailing Address				I INDIVIDUO TITO STORE ISTER INCIDENTIAL		R WINH DIN	1 E1811 81811 1991	
% steve pr 3641 nw, 2 Lauderdali		% Steve preddie 3641 N.W. 28TH ST. Lauderdale lakes Fl 33311			• Pate Institute of a Collins	7		<del>,</del>	,	
						3. Date Incorporated or Qualified 03/25/1987	3a. Date	of Last P 3/22/19		
· · · · · ·	ace of Business	2a. Mailing Address	<u>├</u> ┐			4. FEI Number			Applied For	
Suite, Apt.	H ata	26	- <del> </del>			<b>65-0001934</b> Not Applicable				
22	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required		
City & State	9	City & State			6. Election Campaign Financing				$\dashv$	
23		28			Trust Fund Contribution			<b>0</b> May Be d to Fees		
Zip	Country	Ζφ	<del>├</del> -1			8. This corporation has liability for i	ntangible ta			7
24	25	29	30	,			□ No	<del></del>		_
	9. Name and Address of Currer	it Registered Agent		81	Name	10. Name and Address of New R	egistered /	gent		
DDEDDI	E CTENE			6'	name					
	e, steve W. 28Th st.			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	_		7
	RDALE LAKES FL 33311			83						4
								·		
				84	City		FL	85   Zi	p Code	
familiar wit	th, and accept the obligations of, Sect	da. Such change was authoriz ion 607.0505, Florida Statutes	es, the abo ed by the o	ove-na corpo	amed corpor oration's boa	ration submits this statement for the pur ord of directors. I hereby accept the appo	pose of cha pintment as	nging its i registered	registered offici Lagent, Lam	э
				l Agent	signature require	od where reinstating)	DATE			16
12. TITLE	OFFICERS AN	D DIFFEOTORS	13,			ADDITIONS/CHANGES TO OFF				<u>그</u> 흙
NAME	PREDDIE, ANN M.	☐ DELETE	1.11				L	] Change	☐ Addition	=
STREET ADDRESS	3641 N.W. 28TH ST.		1.2 N		ADDRESS					8
CHTY-ST-ZIP	LAUDERDALE LAKES FL			11Y-SI	ADDRESS					CR2E034 (12/95)
TITLE	RA	DELETE	2 1 1		- ZIF		г	] Change	Addition	⊣წ
NAME	PREDDI, STEVE	_	2.2 NAME			<b>L</b> .	_ vag.			
STREET ADDRESS	3641 N.W. 28TH ST.		235		ADDRESS					
CITY - ST - ZIP	LAUDERDALE LAKES FL	2 4		2.4 CrTY - ST - ZIP						
TITLE		DELETE	3 1 7	ITLE				] Change	☐ Addition	1
NAME			3.2 NAME							
STREET ADDRESS			3.3 \$	TREET	ADORESS					
CITY-ST-7IP TITLE		DELETE	3 4 CITY -		· ZIP		·			
NAME		[]] DELETE	4. 1 TITLE				L	} Change	☐ Addition	į
STREET ADDRESS			4.2 NAME		ronene.					
CITY-ST-ZIP			4.3 STREET							
TITLE		DELETE	5 1 TIPLE		· ZII'		·	Change	Addition	4
NAME			5 TIME 5 2 NAME				L	j onunge	CT VOORION	
STREET ADDRESS			1		ADDRESS					
CITY - ST - ZIP			54 CHTY -							
TITLE		☐ DELETE	6 1 T					] Change	☐ Addition	1
NAME			62 N	4ME				-		
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP			640	TV_ST.	710					-

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 eath; that I am an officer or diffector 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 any attachment with an address.

SIGNATURE: Alow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-4466 Daytin'e Phoric #