


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000013989 1. Entity Name KEY MARTIAL ARTS SUPPLIES, LLC	
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Principal Place of Business 2778 N. HARBOR CITY BLVD. MELBOURNE, FL 32935	Mailing Address 2778 N. HARBOR CITY BLVD. MELBOURNE, FL 32935
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04272004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3758156	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent RETTICH, KATHLEEN L 3490 KENT DRIVE MELBOURNE, FL 32935

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

**Filing Fee is \$50.00
Due by May 1, 2004**

U000000146272
05/03/04-80058-012 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM RETTICH, KATHLEEN L 3490 KENT DRIVE MELBOURNE, FL 32935
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BORENGASSER, MARCUS 3490 KENT DRIVE MELBOURNE, FL 32935
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DO NOT WRITE IN THIS SPACE

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: Marcus Borengasser Marcus Borengasser 4/28/04 321-242-6336
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #