

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015761

FILED  
May 30, 2007  
Secretary of State

Entity Name: BLACK BELT STUDIOS, LLC

**Current Principal Place of Business:**

10115 SUNSET STRIP  
SUNRISE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

10115 SUNSET STRIP  
SUNRISE, FL 33322

**New Mailing Address:**

FEI Number: 51-0468289      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

USA MARTIAL ARTS AND FITNESS, INC.  
10115 SUNSET STRIP  
SUNRISE, FL 33322      US

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: USA MARTIAL ARTS AND, FITNESS CENTE R S, INC.  
Address: 10115 SUNSET STRIP  
City-St-Zip: SUNRISE, FL 33322 US

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RICHARD HARTMAN

MGRM

05/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date