

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000047006

**FILED**  
**Mar 22, 2008**  
**Secretary of State**

**Entity Name:** TAMPA ACADEMY OF MARTIAL ARTS, LLC

**Current Principal Place of Business:**

12719 RACE TRACK ROAD  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

12719 RACE TRACK ROAD  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:** 20-4823089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARNIEWICZ, JUDY M ESQ  
315 S. HYDE PARK AVE.  
SUITE A  
TAMPA, FL 33606 US

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

JOHNSON, SEAN M CPA  
10971 COUNTRYWAY BLVD.  
TAMPA, FL 33626 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: SEAN M. JOHNSON

03/22/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SCOPPA, EDWARD  
Address: 12719 RACE TRACK ROAD  
City-St-Zip: TAMPA, FL 33626

**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: EDWARD SCOPPA

MGRM

03/22/2008

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