FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 2:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M46470

1. Corporation Name

USA SHITO RYU
KARATE SCHOOL CORP.

Principal Place of Business	Mailing Address
356 PALM AVE. HIALEAH, FL 33010.	356 PALM AVE. HIALEAH, FL 33010.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02-11-87.
3a. Date of Last Report: 03-24-94.

2. Principal Place of Business — 21: 2400 SW 137th Ave; 22: Suite, Apt. #, etc; 23: City & State: Miami, Florida; 24: Zip: 33175; 25: Country: Dade

2a. Mailing Address — 26: 2400 SW 137th Ave; 27: Suite, Apt. #, etc; 28: City & State: Miami, Florida; 29: Zip: 33175; 30: Country: Dade

4. FEI Number: 65-0043525. ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

PEREZ, LEONEL.
356 PALM AVE.
HIALEAH, FL 33010.

10. Name and Address of New Registered Agent

81 Name: CAREN LESSER
82 Street Address (P.O. Box Number is Not Acceptable): 2400 SW 137th Ave
83:
84 City: Miami FL 85 Zip Code: 33175

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] 5/30/95
Signature required in printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: LEONEL, PEREZ 356 PALM AVE. HIALEAH, FL 33010. delete	11 TITLE: P/S ☒ Change ☐ Addition 12 NAME: Caren Lesser 13 STREET ADDRESS: 2400 SW 137th Ave 14 CITY ST ZIP: Miami, Florida 33175
	21 TITLE ☐ Change ☐ Addition 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP
	31 TITLE ☐ Change ☐ Addition 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP
	41 TITLE ☐ Change ☐ Addition 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP
	51 TITLE ☐ Change ☐ Addition 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP
	61 TITLE ☐ Change ☐ Addition 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP

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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)(i), 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 oath; that I am an officer or director 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 an attachment with an address.

SIGNATURE: [signature] 4/18/95 B871423
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Document Number #