FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	ANNUAL REPORT 1997			Secretary of State DIVISION OF CORPORATIONS				Secretary of State			
	MENT in Name R'S SCHOO		4886 AEKWONDO, INC	(4)				e keereen der leijn eiden de	11 1811 8 8 111 11	8)) 8(3)) 812() 812() 812() 810()	Draw Jady
District	-4.D/-					·			D HAND BIN D	27. 2 .27. 20 1 ./ 2 /27 2 /27.	
Principal Place of Business C/O P.O. BOX 23 KILLARNEY FL 34740 US			C/O P.	Mailing Address C/O P.O. BOX 23 KILLARNEY FL 34740 US			(
6 Pale Seal P	Diana di Danisa		I 6//				: 1	3. Date Incorporated or 06/06/1988	Qualified	3a. Date of Last 04/05/1996	
21 Principal F	Place of Busine	ISS	26 M	ailing Address				4. FEI Number 59-2887578			pplied For lot Applicable
Sulte, Apt.	, #, etc.			ile, Apt. #, etc.				Certificate of Status D	anirod		Additional
22	 		27							Fee F	Sequired
City & Stat	le		28	ly & State				Election Campaign Fi Trust Fund Contribution	on	Added	May Be to Fees
Zip 24	2	Country	[Zij	0	Count	ry	1	 his corporation has I Florida Statutes 		Jangible tax under : Yes \tag{7} No	s. 199.032,
			s of Current Register	ed Agent	1301			10. Name and Address	17		
	NER, DENIS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		8	1 Nami	0				
	9 MANDARIN		_		8	2 Stree	t Addres	s (P.O. Box Number is No	Acceptable	e)	
WINI	ter garden	FL 3478	7		8	3			· · · · · · · · · · · · · · · · · · ·		~
						<u></u>			·		
					8	4 City				FI 85 Zip	Code
11. Pursuant	to the provisio	ns of Soction	ons 607,0502 and 607.	1508, Florida Statu	ites, the abo	ve namo	d corpor	ation submits this stateme	nt for the pu	rpose of changing	its registered
agent. I a	registered agei am familiar with	ni, or both, i, and acce	n the State of Horida. pl the obligations of, Se	Such change was ection 607.0505, F	autnorizea Jorida Statut	by the co es. ₍	rporation	ation submits this stateme is board of directors. I her	eby accept	the appointment as	s registered
SIGNATURE	A		The second second second	يي کا مخالوه کا آنو کا پهيوند د داد استان پريسود				whon romstating)	م دست تمو دستور چود.	المعامية بيساني ياليا	
12,	Signature, typica or		of registered agent and the flap FICERS AND DIRECTO		13.	gent signatu	at. tednited:	when reinstating) ADDITIONS/CHANGES		DATE ERS AND DIRECTO	FIS IN 12
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14. I do heret	by certify that to	he informat	ion supplied with this fi	ling does not qual	ify for the ex	emption	stated in	Section 119.07(3)(i), Florid	da 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 offect 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 of an attachment with an address.

SIGNATURE:

ONLY 1997 407-877-7191

FILED

Mar 13 1997 8:00am