

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001721

FILED
Jan 22, 2006
Secretary of State

Entity Name: ORLANDO TAIKO DOJO, INC.

Current Principal Place of Business:

5577 DEER CREEK DR
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

5577 DEER CREEK DR
ORLANDO, FL 32821

New Mailing Address:

FEI Number: 03-0414459 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISHIKURA, TAKEMASA
5577 DEER CREEK DR
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ISHIKURA, TAKEMASA
Address: 5577 DEER CREEK DR
City-St-Zip: ORLANDO, FL 32821

Title: D () Delete
Name: ISHIKURA, YUKO
Address: 5577 DEER CREEK DR
City-St-Zip: ORLANDO, FL 32821

Title: D () Delete
Name: ISHIKURA, KAZUYUKI
Address: 6811 TANGLEWOOD BAY DR #2503
City-St-Zip: ORLANDO, FL 32821

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YUKO ISHIKURA

D

01/22/2006

Electronic Signature of Signing Officer or Director

_____ Date