2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004
Secretary of State

DOCUMENT# N03000009147

Entity Name: VIKTORY GYMNASTICS, INC.

Current Principal Place of Business:

2543 GRESHAM DRIVE
ORLANDO, FL 32807

New Principal Place of Business:

6606 KINGSPOINTE PARKWAY
ORLANDO, FL 32819

Current Mailing Address:

2543 GRESHAM DRIVE
ORLANDO, FL 32807

New Mailing Address:

6606 KINGSPOINTE PARKWAY
ORLANDO, FL 32819

FEI Number: 90-0119266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WATSON, JULIE
2543 GRESHAM DRIVE
ORLANDO, FL 32807

Name and Address of New Registered Agent:

WATSON, JULIE
6606 KINGSPOINTE PARKWAY
ORLANDO, FL 32819

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: _____ 05/10/2004
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WATSON, JULIE
Address: 2543 GRESHAM DRIVE
City-St-Zip: ORLANDO, FL 32807

Title: D ( ) Delete
Name: LEE, ELAINE
Address: 24 CARDAMAN DRIVE
City-St-Zip: ORLANDO, FL 32827

Title: D ( ) Delete
Name: LEE, J.K.
Address: 24 CARDAMAN DRIVE
City-St-Zip: ORLANDO, FL 32827

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WATSON, JULIE PRES.
Address: 7401 SUGAR BEND DR.
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Change ( ) Addition
Name: WATSON, KARL
Address: 1624 MERCY DR.
City-St-Zip: ORLANDO, FL 32808

Title: D (X) Change ( ) Addition
Name: WATSON, MACEY
Address: 7401 SUGAR BEND DR.
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JULIE WATSON D 05/10/2004
Electronic Signature of Signing Officer or Director — Date