2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007540

FILED Aug 28, 2009 Secretary of State

Entity Name: BLACK BELT FOR LIFE STUDIOS-AFTER SCHOOL, SPRING & SUMMER CAMP, INC.

Current Principal Place of Business: New Principal Place of Business:

16215 SW 88 STREET MIAMI, FL 33196

Current Mailing Address: New Mailing Address:

16215 SW 88 STREET MIAMI, FL 33196

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CASTRO, REY 16215 SW 88 STREET MIAMI, FL 33196 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:

Clastera is Cinneting of Decistors of August

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: ALICEA, JORGE Name: ARZANI, JUAN

Address: 16215 SW 88 STREET Address: 16215 SW 88 STREET
City-St-Zip: MIAMI, FL 33196
City-St-Zip: MIAMI, FL 33196

Title: S () Delete Title: S (X) Change () Addition Name: ARZANI, JUAN Name: CASTRO, REY

 Name
 ARZANI, JOAN
 Name
 CASTRO, RET

 Address:
 16215 SW 88 STREET
 Address:
 16215 SW 88 STREET

 City-St-Zip:
 MIAMI, FL 33196
 City-St-Zip:
 MIAMI, FL 33196

Title: T (X) Delete Title: () Change () Addition

 Name:
 CASTRO, REY
 Name:

 Address:
 16215 SW 88 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33196
 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 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: REY CASTRO S 08/28/2009