

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 16 PM 3: 08

DOCUMENT # **N44470** (5)  
1. Corporation Name  
**MIAMI JUDO CLUB, INC.**

Principal Place of Business Mailing Address  
13931 SW 71ST LN 13931 SW 71ST LN  
MIAMI FL 33183 MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>07/29/1991</b>	3a. Date of Last Report <b>02/17/1994</b>
4. FEI Number <b>65-0290195</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent  
**LABRADOR, EDWARD G.**  
13931 SW 71ST LN  
MIAMI FL 33183

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	<b>FL</b>

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, print or printed name of registered agent and title if applicable.

NOTE: Registered Agent signature required when correlating

12. OFFICERS AND DIRECTORS	
TITLE	<b>CPTD</b>
NAME	<b>LABRADOR, LARRY</b>
STREET ADDRESS	<b>13931 SW 71ST LANE</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>D</b>
NAME	<b>LABRADOR, CIRA M.</b>
STREET ADDRESS	<b>13931 SW 71ST LANE</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>VD</b>
NAME	<b>LABRADOR, EDWARD G.</b>
STREET ADDRESS	<b>13931 SW 71ST LANE</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>S</b>
NAME	<b>LABRADOR, ELIZABETH M.</b>
STREET ADDRESS	<b>13931 S.W. 71ST LANE</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>D</b>
NAME	<b>FERNANDEZ, JULIO</b>
STREET ADDRESS	<b>13931 S.W. 71ST LANE</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		DATE
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment, with my address.

SIGNATURE: *L. Labrador* **2/12/95** **301-586-1848**  
(Date) (Daytime Phone #)