2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 15, 2004 8:00 am Secretary of State DOCUMENT # N96000006318 1. Entity Name 03-15-2004 90090 026 ****61.25 AIKIDO ASU SHINDAI, INC. Mailing Address Principal Place of Business 1940 BRENGLE AVE. ORLANDO FL 32808 US 1940 BRENGLE AVE. უყციასოს ORLANDO FL-32808 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-3430165 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOOKER, DENNIS Street Address (P.O. Box Number is Not Acceptable) 1940 BRENGLE AVE ORLANDO FL 32808 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and litle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Florida Department of State Due By May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change Addition HOOKER, DENNIS NAME 1940 BRENGLE AVENUE STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete Addition JONES, DAVID PH.D. NAME NAME 1940 BRENGLE AVENUE STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP ۷D TITLE ☐ Delete TITLE Change Addition CANIN, BRIAN NAME NAME 1940 BRENGLE AVENUE STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITI F **™** Change ☐ Addition DAVIS, BRIAN Roebuck, Gregor NAME NAME 1940 BRENGLE AVENUE 1940 Brengle Ave. STREET ADDRESS STREET AODRESS ORLANDO FL CITY-ST-ZIP Orlando FL 32808 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition FASEN, STEPHEN NAME NAME 1940 BRENGLE AVENUE STREET ADDRESS STREET ADDRESS ORLANDO FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.