

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002904

FILED
May 07, 2005
Secretary of State

Entity Name: BARAGUA JUDO KAI, INC.

Current Principal Place of Business:

251 SW 22ND AVE
MIAMI, FL 33135 US

New Principal Place of Business:

Current Mailing Address:

7901 SW 132 AVENUE
MIAMI, FL 33183 US

New Mailing Address:

FEI Number: 65-0758273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

FERNANDEZ, ALBERTO T
7901 SW 132 AVENUE
MIAMI, FL 33183 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PALACIOS, SILVIA
Address: 12011 SW 29 TERRACE
City-St-Zip: MIAMI, FL 33176

Title: PD () Delete
Name: FERNANDEZ, ALBERTO
Address: 7901 SW 132ND AVE
City-St-Zip: MIAMI, FL 33183

Title: VD () Delete
Name: SILVESTRE, RAMON J
Address: 2512 GULFSTREAM DRIVE
City-St-Zip: MIRAMAR, FL 33023

Title: S () Delete
Name: CARMONA, AQUILES
Address: 15463 SW 92 ST
City-St-Zip: MIAMI, FL 33196

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:

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 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: ALBERTO T. FERNANDEZ

PD

05/07/2005

Electronic Signature of Signing Officer or Director

Date