2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# N99000005872

Entity Name: BLACK LOTUS ACADEMY OF THE MARTIAL ARTS, INC.

Current Principal Place of Business:

18763 SW 107TH AVENUE (MARLIN ROAD)
CUTLER RIDGE, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

18763 SW 107TH AVENUE (MARLIN ROAD)
CUTLER RIDGE, FL 33157 US

New Mailing Address:

FEI Number: 65-0958913 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONES JR., VERNON M PROF.
18763 SW 107TH AVENUE (MARLIN ROAD)
CUTLER RIDGE, FL 33157 US

Name and Address of New Registered Agent:

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:	P	( ) Delete
Name:	JONES JR., VERNON M PROF.	
Address:	18763 SW 107TH AVENUE	
City-St-Zip:	CUTLER RIDGE, FL 33189	
Title:	VP	( ) Delete
Name:	JONES-WOODLEY, VONNETTA A SENSEI	
Address:	11720 SW 112 CT	
City-St-Zip:	MIAMI, FL 33157	
Title:	VP	( ) Delete
Name:	CONCEPCION, LIVAN RENSHI	
Address:	90 N HOMESTEAD BLVD	
City-St-Zip:	HOMESTEAD, FL 33030	
Title:	S	( ) Delete
Name:	JIMENEZ, DANIEL SENSEI	
Address:	12430 SW 192 TR	
City-St-Zip:	MIAMI, FL 33177	
Title:	T	( ) Delete
Name:	CARDONA, MARIANA SAMPAI	
Address:	12506 SW 147 TR	
City-St-Zip:	MIAMI, FL 33186	
Title:	VP	( ) Delete
Name:	TORRES, ROXANA SENSEI	
Address:	11815 SW 206 STREET	
City-St-Zip:	MIAMI, FL 33177 US	

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:		
Title:	T	(X) Change ( ) Addition
Name:	CARDONA, MARIANA SAMPAI	
Address:	21657 SW 107 AVENUE	
City-St-Zip:	MIAMI, FL 33157	
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 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: VERNON M. JONES JR. P 04/30/2006

Electronic Signature of Signing Officer or Director — Date