## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 17, 2006 08:00 AM Secretary of State **DOCUMENT # P00000004794** 1. Entity Name HYDÉ TAE KWON DO, INC. Principal Place of Business Malling Address 6800 GULFPORT BLVD S **6800 GULFPORT BLVD S** PASADENA, FL 33707 PASADENA, FL 33707 CR2E034 (11/05) No Cho-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3620637 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent HYDE, HENRY DO NOT WRITE 6800 GULFPORT BLVD S PASADENA, FL 33707 IN THIS SPACE 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 title # applicable (NOTE Registered Agent signature required when reinstairing) OATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. JIJEE HYDE, HENRY NAME U00000510370 6800 GULFPORT BLVD S STREET ADDRESS 29/06-80004-002 150.dh CITY-ST-ZIP PASADENA, FL 33707 NAME STREET ADDRESS CITY-ST-202 1311 8 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP KILE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information inclicated 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 607, 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.

SIGNATURE: X

CITY-ST-ZIP

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED