

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

027449 AV

04-02-2002 90947 049 ***150.00

DOCUMENT # P00000005355

1. Entity Name
SHOTOKAN KARATE, INC.

Principal Place of Business

**9421 SW 61ST STREET
 MIAMI FL 33173**

Mailing Address

**9421 SW 61ST STREET
 MIAMI FL 33173**

2. Principal Place of Business

7950 SW 94ST
 Suite, Apt. #, etc.

3. Mailing Address

7950 SW 94ST
 Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33156

Country

USA

Zip

33156

Country

USA

4. FEI Number

65-0996359

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**LEE, STEVEN P ESQ.
 1699 CORAL WAY
 SUITE 502
 MIAMI FL 33145**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **CHOW, GEE M**
 STREET ADDRESS **9421 SW 61ST STREET**
 CITY-ST-ZIP **MIAMI FL 33173**

TITLE **VTD** ☐ Delete
 NAME **BOUZA-CHOW, ARACELI V**
 STREET ADDRESS **9421 SW 61ST STREET**
 CITY-ST-ZIP **MIAMI FL 33173**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
 NAME **CHOW, GEE M.**
 STREET ADDRESS **7950 SW 94ST**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE **VTD** ☒ Change ☐ Addition
 NAME **BOUZA-CHOW, ARACELI**
 STREET ADDRESS **7950 SW 94ST MIAMI FL 33156**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/02

Date

3055960597

Daytime Phone #

CR2E034 (9/01)