

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000018228

FILED
May 26, 2004
Secretary of State

Entity Name: HIGH PERFORMANCE MARTIAL ARTS, INC.

Current Principal Place of Business:

930 MARCUM ROAD
#9
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

930 MARCUM ROAD
#9
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 59-3627112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HURLEY, DAVID A
922 1/2 SUCCESS AVE
LAKELAND, FL 33803 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HURLEY, DAVID
Address: 781 GLENDALE STREET
City-St-Zip: LAKELAND, FL 33803

Title: VP () Delete
Name: KELLIN, W R
Address: 4639 SAN ANTONIO
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A. HURLEY

PT

05/26/2004

Electronic Signature of Signing Officer or Director

Date