

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004867

**FILED**  
**Jul 05, 2004**  
**Secretary of State**

**Entity Name:** KNOCKOUT PROMOTIONS, INC.

**Current Principal Place of Business:**

13711 CALLINGTON DR  
WELLINGTON, FL 33414

**New Principal Place of Business:**

2301 S. CONGRESS AVE  
APT. 414  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

13711 CALLINGTON DR  
WELLINGTON, FL 33414

**New Mailing Address:**

2301 S. CONGRESS AVENUE  
BOYNTON BEACH, FL 33426

FEI Number: 65-1069227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LYNN, DAVID  
13711 CALLINGTON DR  
WELLINGTON, FL 33414

**Name and Address of New Registered Agent:**

LYNN, DAVID  
2301 S. CONGRESS AVENUE  
APT. 414  
BOYNTON BEACH, FL 33426

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:

07/05/2004

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: D ( ) Delete  
Name: LYNN, DAVID  
Address: 13711 CALLINGTON DR  
City-St-Zip: WELLINGTON, FL 33414

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LYNN, DAVID  
Address: 2301 S. CONGRESS AVE, APT. 414  
City-St-Zip: BOYNTON BEACH, FL 33426

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 LYNN

PRES

07/05/2004

Electronic Signature of Signing Officer or Director

Date