## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000045986

1. Entity Name

KITA KAZE BUJUTSU KAI, INC.

## FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 91220 035 \*\*\*150.00

DO NOT WRITE IN THIS SPACE					11005566		
Principal Place of Business     3004 Slippery Rock Avenue     Suite, Apt. #, etc.		3. Mailing Address 3004 Slippery Rock Avenue Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State Orlando, Florida		City & State Orlando, Florida			4. FEI Number 59-3727079 Applied For Not Applicable		
<sup>Zip</sup> 32826	Country USA	<sup>Zip</sup> 32826	Coun USA		5. Certificate of Status Desired		
	DO NOT WRITE			7. Name and Address of Current Registered Agent Name Richard C. Kelley, Jr. Street Address (P.O. Box Number is Not Acceptable)			
	PACE (		3004 Slippery Rock Avenue				
				City Orland	- 1 32820		
<ol> <li>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.</li> </ol>							
SIGNATURE	Signature, typert or printed name of registered ag	snt and title it applicable. (NO	IE: Registere	d Agent signature required :	when reinstating)	DATE	
January 1 - May 1, Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State						ampaign Financing I Contribution,	\$5.00 May Be Added to Fees
10.	OFFICERS AN	ID DIRECTORS	ind Tint	CANTE MARKET			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P/S/T KELLEY, RICHARD C. JR. 3004 SLIPPERY ROCK AVE., ORL., FL 32826			E E ET ADDRESS ST - ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. TAYLOR, JAMES 2033 Kelly Creek Circle, Oviedo, FL 32765			ET ADDRESS ST-ZIP			
TITLE	V NOGUR, MARTIN A. 2601 Westhall Lane, Maitland, Florida 32751			<b>建筑</b> 透射			
NAME . STREET ADDRESS CITY-ST-ZIP				ET ADDRESS ST-ZIP	// DO I	NOT WRIT	E
TITLE NAME STREET ADDRESS CITY-ST-ZIP			6400		IN T	HIS SPAC	E. F.
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- West and the second	NAMI STRE	ET ADDRESS :			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			HAM	24.30 3.23			

12. Thereby certify that the information supplied with this filling 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 10 or on an attachment with an address, with all given like empowered.

SIGNATURE:

VALUE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF

Richard C. Kelley, Jr., Pres

4/19/2003 (407) 737-7700

Daytime Phone #