

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000063865

Entity Name: #1 MARTIAL ARTS INC.

FILED  
Apr 28, 2004  
Secretary of State

## Current Principal Place of Business:

#1 MORTIAL PORTS  
15355 AMBERRY DR.  
TAMPA, FL 33647

## New Principal Place of Business:

15355 AMBERLY DRIVE  
TAMPA, FL 33647

## Current Mailing Address:

#1 MORTIAL PORTS  
15355 AMBERRY DR.  
TAMPA, FL 33647

## New Mailing Address:

15355 AMBERLY DRIVE  
TAMPA, FL 33647

FEI Number: 59-3743142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DIAZ, GREG  
4507 WILD PLUM LANE  
LUTZ, FL 33549

## Name and Address of New Registered Agent:

DIAZ, GREGORIO  
19310 SEAMIST LANE  
LUTZ, FL 33558

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: GREGORIO DIAZ

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DIAZ, GREG  
Address: 4507 WILD PLUM LANE  
City-St-Zip: LUTZ, FL 33549

Title: VST ( ) Delete  
Name: DIAZ, SUSAN E  
Address: WILD PLUM LN  
City-St-Zip: LUTZ, FL 33548

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DIAZ, GREGORIO  
Address: 19310 SEAMIST LANE  
City-St-Zip: LUTZ, FL 33558 US

Title: VST (X) Change ( ) Addition  
Name: DIAZ, SUSAN E  
Address: 19310 SEAMIST LANE  
City-St-Zip: LUTZ, FL 33558

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: GREGORIO DIAZ

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date