2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000059909

1214 SWAN ST

WINTER SPRINGS, FL 32708

Address: City-St-Zip:

Entity Name: FLORIDA TRADITIONAL MARTIAL ARTS INC.

FILED Apr 30, 2003 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
1250 SEMI LARGO, FI	NOLE BLVD, L 33770	STE 7			
Current Mailing Address:			New Mailing Address:		
1250 SEMI LARGO, FI	NOLE BLVD, L 33770	STE 7			
FEI Number:	27-0017347	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
The above	N ST SPRINGS, FL		ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR					
	Electro	nic Signature of Registered Ag	ent	Date	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MCDONALD, F 4732 SWANSI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KEILA, JERMY 320 26 AVE N		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DVT (PAUL, BRADL) Delete EY B	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: RICHARD E MCDONALD DP 04/30/2003