2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000100158

Entity Name: TAE KWON DO CENTER OF SAN CARLOS PARK, INC.

FILED Apr 14, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

15881 SOUTH TAMIAMI TRAIL FORT MYERS, FL 33908

Current Mailing Address: New Mailing Address:

9130 KINGS COVE COURT 9130 KINGS COVE COURT FORT MYERS, FL 33912 FORT MYERS, FL 33967

FEI Number: 42-1552792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TENN, LEON
9130 KINGS COVE COURT
FORT MYERS, FL 33912 US

TENN, LEON
9130 KINGS COVE COURT
FORT MYERS, FL 33967 US

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: LEON TENN 04/14/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: TENN, LEON Name: TENN, LEON

 Name:
 TENN, LEON
 Name:
 TENN, LEON

 Address:
 9130 KINGS COVE CT
 Address:
 9130 KINGS COVE CT

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:
 FORT MYERS, FL 33967

Title: T () Delete Title: T (X) Change () Addition

 Name:
 TENN, MADELINE B
 Name:
 TENN, MADELINE B

 Address:
 9130 KINGS COVE CT.
 Address:
 9130 KINGS COVE CT.

 City-St-Zip:
 FORT MYERS, FL 33912
 City-St-Zip:
 FORT MYERS, FL 33967

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LEON TENN P 04/14/2007