

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90003 018 ***150.00

DOCUMENT # P02000132400

1. Entity Name
 ROTH MARTIAL ARTS, INC.



Principal Place of Business: 1140 19TH ST. VERO BEACH, FL 32960
 Mailing Address: PO BOX 2427 VERO BEACH, FL 32961

54064583



2. Principal Place of Business		3. Mailing Address		4. FEI Number 51-0443184		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

07142004 Chg-P CR2E034 (10/03)

6. Name and Address of Current Registered Agent

ROTH, DAVID
 601 39TH AVE.
 VERO BEACH, FL 32968

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SAMSON, SARAH C PO BOX 2427 VERO BEACH, FL 32961 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROTH, MARY C 359 CONCHA DR. SEBASTIAN, FL 32958 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. DAVID ROTH 601 39TH AVE VERO BEACH FL 32968 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres David Roth - 601-39th Ave Vero Beach FL 32968 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **7-15-04** (772) 563-9333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

Attachments

54064583

K & L Bookkeeping & Tax Service

Joyce E. Kindel
1131 7TH Avenue
Vero Beach, FL 32960

Telephone 772 569-1282
Fax 772 569-0160
jek1237@cs.com

July 14, 2004

Florida Dept. of State
Secretary of State
Glenda E Hood
Div. Of Corporations
P. O. Box 6327
Tallahassee FL 32314

Reference: ROTH MARTIAL ARTS INC. P02000132400

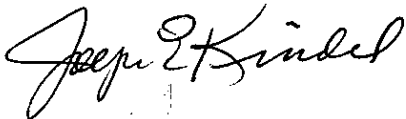
Dear Ms. Hood,

The above listed corporation is in receipt of Notice of Intent to Dissolve.

The taxpayers do not remember receiving the first notice. We have enclosed a check for the initial fee of \$150. In hopes that the state will abate the \$400 additional fee.

Your attention to this matter is greatly appreciated.

Sincerely,



Joyce E Kindel
Tax Preparer



David Roth
President

Enclosure: Annual Report 2004 / Check \$150.