

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000006477

FILED
Jan 28, 2005
Secretary of State

Entity Name: BLACK KNIGHT KARATE AND FITNESS CENTER, INC.

Current Principal Place of Business:

1003 A HOLBROOK CT
PORT ST. LUCIE, FL 34952

New Principal Place of Business:

1510 VILLAGE GREEN DR
PORT ST. LUCIE, FL 34952

Current Mailing Address:

1003 A HOLBROOK CT
PORT ST. LUCIE, FL 34952

New Mailing Address:

1510 VILLAGE GREEN DR
PORT ST. LUCIE, FL 34952

FEI Number: 03-0503768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, EDWARD M
1767 ROYAL FERN LN
FORT PIERCE, FL 34982 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, EDWARD M
Address: 1767 ROYAL FERN LN
City-St-Zip: FT. PIERCE, FL 34982

Title: V () Delete
Name: AVERSA, RICHARD
Address: 1118 S.E. MENDOZA AVE
City-St-Zip: PORT ST. LUCIE, FL

Title: ST () Delete
Name: AVERSA, JAMIE E
Address: 1118 S.E. MENDOZA AVE
City-St-Zip: PORT ST. LUCIE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAIME AVERSA

S/T

01/28/2005

Electronic Signature of Signing Officer or Director

Date