

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

3/2

FILED
Mar 28, 2005 8:00 am
Secretary of State

03-02-2005 90082 001 ***150.00

66007493



1st MOORE CR2E034 (10/04)

DOCUMENT # P03000039348 1. Entity Name TYLER'S TKD FITNESS, INC.					
Principal Place of Business 205 JOEL BLVD #300 LEHIGH ACRES FL 33970			Mailing Address 205 JOEL BLVD #300 LEHIGH ACRES FL 33970		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number AP-PLIED FOR	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent TYLER, GIAU 205 JOEL BLVD #300 LEHIGH ACRES FL 33970				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS: \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	PSTD TYLER, GIAU 205 JOEL BLVD #300 LEHIGH ACRES FL 33970 <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	
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date 2-28-05 Daytime Phone # 239-437-2006		

200334 R53913


 Department of the Treasury
 Internal Revenue Service
 MEMPHIS TN

37501-0038

ATTACHMENT

P030000393 SB V

 Date of this notice:
 Taxpayer Identifying Number
 Form:

 SEP. 1, 2003
 90-0099122
 Tax Period:

66007493

 For assistance you may
 call us at:

1-800-829-0115

 Or you may write to us at
 the address shown at the
 left. If you write, be
 sure to attach the bottom
 part of this notice.

 TYLERS TKD FITNESS INC
 205 JOEL BLVD 300
 LEHIGH ACRES FL 33972-0203759

NOTICE OF ACCEPTANCE AS AN S-CORPORATION

~~WE HAVE ACCEPTED YOUR ELECTION TO BE TREATED AS AN S-CORPORATION WITH AN~~
 ACCOUNTING PERIOD OF DECEMBER BEGINNING APR. 1, 2003.

 PLEASE KEEP THIS NOTICE IN YOUR TAX RECORDS AS VERIFICATION OF YOUR ACCEPTANCE
 AS AN S-CORPORATION.

 IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE OR THE ACTIONS WE HAVE TAKEN, PLEASE
 WRITE TO US AT THE ADDRESS SHOWN ABOVE. IF YOU PREFER, YOU MAY CALL US AT THE IRS
 TELEPHONE NUMBER LISTED IN YOUR LOCAL DIRECTORY. AN EMPLOYEE THERE MAY BE ABLE TO
 HELP YOU. HOWEVER, THE OFFICE AT THE ADDRESS SHOWN ON THIS NOTICE IS MOST FAMILIAR
 WITH YOUR CASE.

 IF YOU WRITE TO US, PLEASE PROVIDE YOUR TELEPHONE NUMBER AND THE MOST CONVENIENT
 TIME FOR US TO CALL SO WE CAN CONTACT YOU TO RESOLVE YOUR INQUIRY. PLEASE RETURN THE
 BOTTOM PART OF THIS NOTICE TO HELP US IDENTIFY YOUR CASE.

THANK YOU FOR YOUR COOPERATION.

 HELPFUL HINT: FOR FASTER SERVICE, TRY CALLING US ANY DAY EXCEPT MONDAY WHEN OUR
 CALL VOLUMES ARE HIGHEST.

 To make sure that IRS employees give courteous responses and correct information to taxpayers, a second IRS employee sometimes listens in on
 telephone calls.

Keep this part for your records

Overlay 5 Form 8489 (Rev. 8-91)

Return this part to us with your check or inquiry

Your telephone number

Best time to call

200334

29953-605-04654-3

 INTERNAL REVENUE SERVICE
 MEMPHIS TN 37501-0038

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 TYLERS TKD FITNESS INC
 205 JOEL BLVD 300
 LEHIGH ACRES FL 33972-0203759

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