2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000059605 1. Entity Name UNITED SCHOOLS OF MARTIAL ARTS, INC.



FILED Mar 06, 2006 08:00 AM Secretary of State

Principal Place of Business

3106 W 76 ST. HIALEAH, FL 33012 Mailing Address

P.O. BOX 144484 CORAL GABLES, FL 33114



DO NOT WRITE IN THIS SPACE

02152008	No Chg-P	CR2E034 (11/05)	
	-		

4. FEI Number 16-1672125 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ORDONEZ, SANTANDER 1840 WEST 49TH ST. #220-4 HIALEAH, FL 33012

SIGNATURE: - Thuran of A-

DO NOT WRITE IN THIS SPACE

HIALEAH, FL 33012			IN THIS SPACE					
		}						
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.	Signature, typed or printed name of registered agent and title t	Yeppiicable. (NOTE: Registered	Agent algnatur	a required when reinstating)	DATE			
Fil After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DE PRAT, THERESA 3106 W 76 ST. HIALEAH, FL 33018		·		· · · · · · · · · · · · · · · · · · ·			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE HAME STREET ADDRESS CITY-ST-ZIP								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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.								

Theresa

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR