

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000044157

FILED
Feb 17, 2009
Secretary of State

Entity Name: SIDEKICK MARTIAL ARTS, INC.

Current Principal Place of Business:

270 NW PEACOCK BLVD., SUITE 112
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

270 NW PEACOCK BLVD., SUITE 112
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 20-8824182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, KENNETH A
2400 SE FEDERAL HWY., 4TH FLOOR
STUART, FL 34994 US

Name and Address of New Registered Agent:

HOSSLER, JONAN
719 SW GREAT EXUMA COVE
PORT ST LUCIE, FL 34986 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: JONAN HOSSLER

02/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STRUBLE, WILLIAM
Address: 1350 NW ACKARD AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D () Delete
Name: HOSSLER, JO
Address: 719 SW GREAT EXUMA COVE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STRUBLE, WILLIAM PRES
Address: 1350 NW ACKARD AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D (X) Change () Addition
Name: HOSSLER, JO VP
Address: 719 SW GREAT EXUMA COVE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: O () Change (X) Addition
Name: HOSSLER, SCOTT F OFFICER
Address: 719 SW GREAT EXUMA COVE
City-St-Zip: PORT ST LUCIE, FL 34986 US

I hereby certify that the information supplied with this filing does not qualify 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: JO HOSSLER

VP

02/17/2009

Electronic Signature of Signing Officer or Director

Date