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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000059343 (2)

NORTH RREVARD JUKO KAI MARTIAL ARTS INC.

FILED May 08 1997 8:00am Secretary of State

Principal Prac 4515 S. HOPK TITUSVILLE FL			odress (EYPOINT DR. E FL 32780-755(0			3. Date Incorporated or Qualified	d 3a . Da	te of Last	Report
9 Drienius I	Place of Business	2a. Mailing	a Address				08/24/1993 4. FEI Number	UU/	14/1996	
2. Principal i 21	riace of business	26. Mailing	3 MODINESS				59-3204869			Applied For Not Applicable
Suite, Apt	#, etc		Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required
City & Sta	ale	City &	State	. , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			6. Election Campaign Financing		\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zφ	Country	Ζφ		Cour	ntry		8. This corporation has liability for			в. 199.032,
24	25	29		30			Florida Statutes	Yes [
	9. Name and Address of Curre	m Hegistered A	rBaut		81	Name	10. Name and Address of New I	uadistera y	Abut	
	CONNELL, PATRICIA S 15 TURKEY POINT DR.									
	ISVILLE FL 32780			1	82	Street Addre	ess (P.O. Box Number is Not Accept	able)		
III	COVILLE LF OF LOAD			-	83					
				-	84	City			10E 7:-	Code
				i	J44	City		FL	85 Zip	o Code
SIGNATURE	Signature hypera or proceed name of registered ag	and and title if nonleas								
12.		ND DIRECTORS		13.		signature require	ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND		
THEF	D		DELETE (NOT	13. 1 1 TiTi	LE	signature require			DIRECTO	
TORE NAME	D MCCONNELL, DANNY			13. 11 TiTi 12 NA	LE ME					
THEF NAME STREET ADDRESS	D MCCONNELL, DANNY 7595 TURKEY POINT DRIVE			13. 11 TUTU 1.2 NA 1.3 STF	LE ME REET AL	DORESS				
THEF NAME	D MCCONNELL, DANNY			13. 11 TiTi 12 NA	LE ME REET AL Y-ST-	DORESS				· Addition
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14. I do 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 annual report or supplemental annual 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

SIGNATURE: