## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State \*

DIVISION OF CORPORATIONS

DOCUMENT # P93000061070 (7) 1. Corporation Name
DOUGHENT 1 DOUGGOOG TO 1

## MIAMI SHOTOKAN KARATE CLUB INC.

Principal Place of Business Mailing Address 10855 SW 72ND ST 10855 SW 72ND ST #45 MIAMI FL 33156 MIAMI FL 33156 3a. Date of Last Report 3. Date Incorporated or Qualified 08/31/1993 08/22/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0446109 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & Stare 6. Election Campaign Financing City & State \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Country Country Yes No Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Tose B. Ferro Street Address (P.O. Box Number is Not Acceptable) 5 W 72 S terran ESCOBIO, ROBERT J **B2** 10855 SW 72ND ST #45 **MIAMI FL 33156** Zip Code 33/56 MIAMI The frustiant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SUSAN SUSAN Escubio 29 Structure, by rod or printe it requires ed agent area tree il applicable DELETE HILLE ESCOBIO, BOBERT J SUSAN ESCODIO 12 NAME NAM. 10855-SW 72ND ST #45 10855 SW72 ST # 45 STREET ADDRESS MAMI FL 33156 Oth St ZiP DELETE 2.1106 ani a FERRAND, JOSE B N.M. 10855 SW 72ND ST #45 2 3 STREET ADDRESS STREET ADDRESS MIAMI FL 33156 2 4 CITY - ST - ZIP CHY ST ZIP Addition DELETE ☐ Change 3 1 THILE TOLE 3.2 NAME NAME 3.3 STREET AUDRESS STREET ADDRESS 34 CITY - ST - ZIP CITY ST 7th ☐ Change Addition DELETE 4 1 TIYLE LIE 4.2 NAME NAM: 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-S1-ZIP CHY ST ZIP ☐ Change ☐ Addition DELETE 5 1 TITLE 1 11.5 5.2 NAME MARKE 5.3 STREET ADDRESS STREET ACCORES! 54 CHY-ST-ZIP CHTY - SJ - ZIP 600001745406 -03/15/96--01109--019 Addition 6 1 THE DELETE HLE 6.2 NAME NAME 63 STREET ADDRESS \*\*\*200.00 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address

64 CITY - S1 - ZIP

City - \$1 - 26

Escobio OR PRINTED NAME OF SIGN SIGNING OFFICER OR DIRECTOR