


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE
		Sandra B. Mortham
		Secretary of State DIVISION OF CORPORATIONS

FILED

97 AUG 15 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # **P94000065169 (2)**

1. Corporation Name

FLORIDA KARATE ASSOCIATION, INC.

Principal Place of Business

8328 NW 103 STREET
HIALEAH GARDENS FL 33016
US

Mailing Address

1725 NW 77TH ST
MIAMI LAKES FL 33015
3350 SW 137 Ave
Miramar, FL 33027

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21	26	09/06/1994	05/28/1996
22	27	4. FEI Number	Applied For
23	28	65-0531602	Not Applicable
24	29	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	30	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
26	31	7. This corporation owes or has paid the current year Intang/ble Personal Property Tax due June 30.	Yes No

9. Name and Address of Current Registered Agent

AMORES, CARIDAD
292 WESTWARD DR
MIAMI SPRINGS FL 33166

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number)
83	City
84	Zip Code

11. Pursuant 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	Change Addition
STREET ADDRESS	Perez, Ramon President	1.2 NAME	
CITY-ST-ZIP	3350 SW 137TH AVE MIRAMIR FL 33027	1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
TITLE	NAME	2.1 TITLE	Change Addition
STREET ADDRESS		2.2 NAME	
CITY-ST-ZIP		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
TITLE	NAME	3.1 TITLE	Change Addition
STREET ADDRESS		3.2 NAME	
CITY-ST-ZIP		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	Change Addition
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
TITLE	NAME	5.1 TITLE	Change Addition
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
TITLE	NAME	6.1 TITLE	Change Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

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 summary 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.

CR2E034 (4/97)

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Dear Sirs or Madam:

Corporation Papers were sent back to us with 30 day notice and the original check stating to correct information refering Director of the corporation. Unfortunately those documents have been misplaced so I am mailing back to your office a second notice that was mailed to my old address and was forwarded, with the \$165.00 renewal fee. Thank you for your cooperation in advance if any questions please call me at (305) 362-3656 or (305) 608-2657.

Respectfully,

Maria Perez

Maria Perez