

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

**APPROVED
AND
FILED**

95 APR 28 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE

DESIGNATED OFFICE

DESIGNATED OFFICE

DESIGNATED OFFICE

DOCUMENT # F94000067618

Wah Lum Kung Fu + Tai Chi Inc

Hampton Plaza
5327 Gunn Highway
Tampa, Florida 33624

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 9/12/94	3a. Number of Local Districts n/a
4. FPI Number applied for	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Type Fund Contribution ☐	\$5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under S 199.032, Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
3. Date of Report 22	3a. Date of Report 27
4. State of Incorporation 23	4a. State of Incorporation 28
5. State of Qualification 24	5a. State of Qualification 29
6. State of Principal Place of Business 25	6a. State of Principal Place of Business 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Kurt R. Borglum, P.A.
366 East Graves Avenue
Suite B
Orange City, Florida 32763

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	
85. Zip Code	FL

11. Pursuant to the provisions of Sections 607.01(3) and 607.14(6), 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 the term "agent," under Florida Statutes.

SIGNATURE

(Print Name of Person Signing for the Corporation)

(Print Name of Person Signing as Registered Agent and State)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	PVPST Sean Cochran Hampton Plaza 5327 Gunn Highway Tampa, Florida 33624	NAME	☐ Change ☐ Addition 300001471963 -05/02/95--023 ****200.00 ****200.00
STREET ADDRESS		STREET ADDRESS	☐ Change ☐ Addition
CITY		CITY	☐ Change ☐ Addition
STATE		STATE	☐ Change ☐ Addition
ZIP CODE		ZIP CODE	☐ Change ☐ Addition
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	☐ Change ☐ Addition
CITY		CITY	☐ Change ☐ Addition
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CITY		CITY	☐ Change ☐ Addition
STATE		STATE	☐ Change ☐ Addition
ZIP CODE		ZIP CODE	☐ Change ☐ Addition

AP 4/28

14. I, the undersigned, being the authorized signatory of the above corporation, hereby declare and certify that the foregoing is a true and correct statement of the facts as they are, and that the corporation is not aware of any untrue or misleading information contained therein. I am familiar with and accept the obligations of the term "agent," under Florida Statutes.

SIGNATURE:

Sean Cochran

(PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

4/5/95 (813) 960-8742