FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P94000072264 (2)

MARCELLINO KARATE CORPORATION

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business 13678 WEST STATE ROAD 84 DAVIE FL 33325 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	(I
DAVIE FL 33325 DAVIE FL 33325 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
3. Date Incorporated or Qualified	
	1
99/28/1994	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied	or
26 65-0529232 Not Appl	
Suite, Apt. #, etc. Suito, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Addition	ายไ
27 Fee Required	
City & State City & State 6. Election Campaign Financing \$5.00 May E	
28 Trust Fund Contribution Added to Fee	
Zip Country Zip Country 8. This corporation owes or has paid the current war Intangible	•
24 25 29 30 Personal Property Tax due June 30. Yes No. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
MARCELLINO, JAMES 81 Name	
ON BACOLETCHUS DOAD	
STE. \$519	}
FORT LAUDERDALE FL 33326	
FL 85 Zip Code	
11. Pursuant to the provisit as of Socials 607 0502 and 07 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its regis	ered
office or registered agent, or bottl. In the State of Flyrida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familial with a side accept the obligations of Section 607.0505, Florida Statutes.	reg
SIGNATURE 4/29/98	ŀ
Signature, typical or printed noise of registered again) and life if applicable (NOTE Registered Agent signature required when reinstating) DATE	
12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	
ALABORIA MIO LIANDO	ddition
STREET ADDRESS 201 PAGDETICLUS PU STE SST9 12 NAME 1.3 STREET ADDRESS 572.0 BRIARWOOD WAY	
PELLINDROLLE FILE PROPERTY STATE AND ALL PROPERTY AND ALL PROPERTY STATE AND ALL PROPERTY AND ALL PROPERTY AND ALL	İ
1/4 LIT-51-2F 3300	ddition
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	dition
NAME 3.2 NAME	}
STREET ADDRESS 33 STREET ADDRESS	
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CITY-ST-ZIP 4.4 CITY-ST-ZIP	
TIFLE DELETE 5.1 TITLE Change A	idition
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STREET ADDRESS 5.3 STREET ADDRESS	
CITY-ST-ZIP 5.4 CITY-ST-ZIP	
	fdition
NAME 62 NAME	}
STREET ADDRESS 63 STREET ADDRESS	ł
6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii).	ation

all report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an address.

SIGNATURE: