

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 07, 2002 8:00 am
Secretary of State

08-07-2002 90199 010 ***150.00

915453

DOCUMENT # **P94000077721**

1. Entity Name

Tiger & Dragon Kenpo Karate School of Martial Arts, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0525802

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Juan Lang

Street Address (P.O. Box Number is Not Acceptable)

4315 N.W. 7th Suite 30-A

City

Miami

FL

Zip Code

33126

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>P.D.</i> <i>Juan Lang</i> <i>4315 N.W. 7th Suite 30-A</i> <i>Miami, FL 33126</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VD</i> <i>Oswaldo Alvarez</i> <i>4315 N.W. 7th Suite 30-A</i> <i>Miami, FL 33126</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>STD</i> <i>Alan Vega</i> <i>4315 N.W. 7th Suite 30-A</i> <i>Miami, FL 33126</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

CR2E034B (12/01)

13. 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 indicated on this report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Juan Lang
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/02 *305-443-4245*
Date Daytime Phone #

8/3/02

Attachment

973439

To Whom it May Concern:

094000077721

I did not receive my Corporation App. in the mail and
I called your Dept. & they send me an app. They also
Told me to write a letter when I send it back stating
that I did not receive my renewal letter on time.
I am sending a check for renewal for \$150.00.

Thank You.