

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
 Sandra B. Merham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

95 AUG -1 AM 11:37

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P94000081172 (6)

1. Corporation Name

EKHOLM'S TAEKWONDO U.S.A., INC.

Principal Place of Business

Mailing Address

**10154 GENI HILL CIRCLE, NORTH
JACKSONVILLE FL 32225**

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JACKSONVILLE FL 32225**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

11/04/1994

4. FEI Number

Applied For

59-3277837

Not Applicable

6. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 1221 N.W. 76th BLVD

26 1221 N.W. 76th BLVD.

Suite, Apt., #, etc.

Suite, Apt., #, etc.

22

27

City & State

City & State

23 GAINESVILLE FL.

28 GAINESVILLE, FL.

Zip

Country

Zip

Country

24 32606

25 U.S.A.

29 32606

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EKHOLM, ERIK
10154 GENI HILL CIRCLE, NORTH
JACKSONVILLE FL 32225**

81. Name

EKHOLM, ERIK

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

5526 N.W. 26th ST

83

84

City GAINESVILLE FL

85. Zip Code

32653

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 registering agent and title if applicable)

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

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE D
NAME EKHOLM, ERIK
STREET ADDRESS 10154 GENI HILL CIRCLE, NORTH
CITY, ST, ZIP JACKSONVILLE FL 32225**

**1.1 TITLE D ☒ Change ☐ Addition
1.2 NAME ERIK EKHOLM
1.3 STREET ADDRESS 5526 N.W. 26th ST.
1.4 CITY, ST, ZIP GAINESVILLE FL**

**TITLE D
NAME WARD, G P
STREET ADDRESS 13809 PLEASANT VALLEY DRIVE
CITY, ST, ZIP JACKSONVILLE FL 32225**

**2.1 TITLE D ☒ Change ☐ Addition
2.2 NAME WARD, G.P.
2.3 STREET ADDRESS 11315 Woodson Loop S.
2.4 CITY, ST, ZIP JACKSONVILLE FL 32225**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP**

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)(d), 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.

SIGNATURE:

G. P. WARD

7-25-95

904-332-8065

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number