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PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000092492 (5)

CHI KARATE AND FITNESS INC.

Principal Place of Business

1811 BOCA RATON BLVD.

Mailing Address

1811 BOCA RATON BLVD.

FILED Apr 28 1997 8:00am Secretary of State



BOCA RATON FL 33431		BOCA RATON FL 33432-1617				
					3. Date Incorporated or Qualified 12/22/1994	3a. Date of Last Report 10/21/1996
2. Principal Pl	lace of Business	2a. Mailing Address	^ -	e 2	4. FEI Number	Applied For
21 500	NE SPANISH NOEL MY	16 500 NEST	ANISH K	WER DW		Not Applicable
Suite, Apt. :		Suite Apt. #, etc.	,		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	DUA RATION PL	City & State 28 BOCA RATIVE	P		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	_Zip	Country		8. This corporation has liability for in	ntangible tax-under s. 199.032.
24 3343	1 25 USB	29 33431	30 U	SA	1 ' '	Yes No
	g. Name and Address of Current F	Registered Agent			10. Name and Address of New Rec	listered Agent
GRE	ENBERG, CHARLES		81	Name		
450	N.E. 20TH ST.		82	Street Addr	ess (P.O. Box Number is Not Acceptable	(a)
#11			02	Stiedt Addit	ess (1.0. box Number is Not Acceptable	0,
BOC	CA RATON FL 33431		83			
			84	City		85 Zip Code
		1007 4500 51 11 51 1	0	<u> </u>	9-03-1-1	FL T
office or re	o the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was a	authorized b	y the corporati	oration submits this statement for the pu on's board of directors. I hereby accep	t the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent a	and (lite if applicable (NOT	E: Registered Ag	ent signature require	ed when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	PO	DELETE	1.1 TITLE			Change Addition
NAME	GREENBERG, CHARLES		1.2 NAME	ŀ		
STREET ADDRESS	450 N.E. 20TH ST., #113		1.3 STREE	ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY-1	ST-ZIP		
TITLE		DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	ADDRESS	•	
CITY-ST-ZIP			2. 4 CITY -	ST-ZIP		
TITLE	DELETE		3.1 TITLE		1.	Change Addition
NAME			3.2 NAME			•
STREET ADDRESS			3.3 S1REE	ADDRESS		•
CITY-ST-ZIP			3.4. CITY -	S1-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-1	ST - ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME -			5.2 NAME			
STREET ADDRESS			5.3 STREE	I ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE	6.1 THTLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			6.4 CHTY-			
	by certify that the information supplied v	with this filing does not quali			in Section 119.07(3)(i), Florida Statutes	s. 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 is changed or on an attachordin will an address. I am an officer or director of the corporation or the receiver or trustee appears in Block 12 or Block 13 is changed or on an attachordin with