

4-29-97 B-5817-C
FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000096747 (7)
1. Corporation Name
SUL'S TAEKWONDO U.S.A., INC.

Principal Place of Business 2437 S.W. 27TH AVENUE OCALA FL 34474	Mailing Address 2437 S.W. 27TH AVENUE OCALA FL 34474-4407
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 2437 SW 27th Ave 23 City & State Ocala FL 24 Zip 34474 25 Country USA		2a. Mailing Address 26 Suite, Apt. #, etc. 27 2437 SW 27th Ave 28 City & State Ocala FL 29 Zip 34474 30 Country USA		3. Date Incorporated or Qualified 12/22/1995	3a. Date of Last Report 04/26/1996
				4. FEI Number 59-3362456	Applied For Not Applicable
				5. Certificate of Status Desired X	\$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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent SUL, CHONG W 2437 S.W. 27TH AVENUE OCALA FL 34474				10. Name and Address of New Registered Agent 81 Name Sul, Chong W. 82 Street Address (P.O. Box Numbers Not Acceptable) 2437 SW 27th Ave. 83 84 City Ocala FL 85 Zip Code 34474	
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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 registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PDST
NAME	SUL, CHONG W	1.2 NAME	
STREET ADDRESS	1801 S.W. 27TH AVENUE, APT. 606	1.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34474	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	
NAME	PETTITT, SCOTT	2.2 NAME	
STREET ADDRESS	1801 S.W. 27TH AVENUE, APT. 606	2.3 STREET ADDRESS	
CITY-ST-ZIP	OCALA FL 34474	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 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 _____ 4/10/97 852-273-1533

CR2E034 (9/96)