2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 15, 2005 8:00 am Secretary of State DOCUMENT # P96000075762 04-15-2005 90064 007 ***150.00 WARRING'S WORLD CHAMPION KICKBOXING ACADEMY, INC. Principal Place of Business Mailing Address 11052 SW 162ND TERRACE 11052 SW 162ND TERRACE MIAMI, FL 33157 MIAMI, FL 33157 2. Principal Place of Business 3. Mailing Address SWIZO ST 13260 Suite, Apt. #, etc. 04112005 CR2E034 (10/03) Chg-P Miami Applied For City & State 4. FEI Number 65-0702209 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6:-Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent WARRING, JAMES Street Address (P.O. Box Number is Not Acceptable) 11052 SW 162ND TERRACE MIAMI, FL 33157 Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) applicable ignature, typed or pri 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. n TITLE ☐ Delete TITLE Change Addition WARRING, JAMES NAME NAME 11052 SW 162ND TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33157 CITY-ST-ZIP Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP . CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

D. Wawy PED OR PRINTED NAME OF STREET OR DIRECTOR

SIGNATURE:

FILED