FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

GAINESVILLE INSTITUTE OF SELF DEFENSE, INC.

Secretary of State 1998 P97000106699 (6)

FILED

Apr 16 1998 8:00am

2481-F MCMULLEN BOOTH RD. CLEARWATER FL 34619		2481-F MCMULLEN BOOTH RD. CLEARWATER FL 34619				
•					DO NOT WRITE IN THIS SPACE	
602 N.W. 75th St.		2481-F Menuller 28. Mailing Address Booth Ad.		iller	3. Date Incorporated or Qualified 12/19/1997	
2. Principal Place of Business		2a. Mailing Address Booth Ad.		rd.	4, FEI Number Applied For	
<u>21 Su</u>	Uta C	Suite, Apt, #, etc.			Not Applicable	
Suite, Apt. #, etc.				P/	5. Certificate of Status Desired See Required Fee Required	
22 Sainaville F. City & State		City & State		7.		
					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23 32 6 Zip	Country	28 33757 Zip	Countr	· · · · · · · · · · · · · · · · · · ·		
24	25	_ 	30	,	6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	g. Name and Address of Curren	1 - 1	301		10. Name and Address of New Registered Agent	
				81 Name		
BARRIGA, SERGIO				<u> </u>		
	1-F MCMULLEN BOOTH RD,		82	82 Street Address (P.O. Box Number is Not Acceptable) 83		
, CL	EARWATER FL 34619		83			
•						
			84	City	FL 85 Zip Code	
44 (0)	a the provinces of Continue 607 050	3 and 607 1609. Elected Chattate	an the show	i nomad		
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 age	 		jent signature i	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	OFFICERS AND	DELETE	13.	···	Change Addition	
TITLE	D SARRIOA OFROIO					
NAME	BARRIGA, SERGIO	•	1.2 NAME			
STREET ADDRESS	STREET ADDRESS 2481-F MCMULLEN BOOTH RD,			T ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34619	T DELETE	1.4 CITY-	ST - ZIP	Chases Addition	
TITLE	_		2.1 TITLE		Change Addition	
NAME	HUNTER, STEVE	·=	22 NAME			
STREET ADDRESS 2481-F MCMULLEN BOOTH RD		ID,	2.3 STRE			
CITY-ST-ZIP	CLEARWATER FL 34619	Driete	2. 4 CITY-	ST-ZIP	Change Addition	
TITLE	☐ DELETE		3.1 TITLE		Change Addition	
NAME			3.2 NAME	-		
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP		The state	3 4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		D 00.575	4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		\mathcal{W}_{\perp}	
STREET ADDRESS			5.3 STREE	T ADDRESS	4.16	
CITY-ST-ZIP		——————————————————————————————————————	5.4 CITY-	ST-ZIP		
TITLE		L] DELETE	6.1 TITLE	ı	Change Addition	
NAME			6.2 NAME		000002491400 -04/17/9801001030	
STREET ADDRESS	DRESS		6.3 STREE	T ADDRESS	***150.00	
CITY-ST-ZIP		an and a real and a second	6.4 CITY-			
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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						
Andrew Commence of the change of the production with the control of the control o						