2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000046603

Entity Name: TAMPA BAY MARTIAL ARTS, INC.

FILED Jan 05, 2005 Secretary of State

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Current Principal Place of Business:			New Prince	New Principal Place of Business:		
4021 SOUTH DALE MABRY TAMPA, FL 33611				10520 RIVERVIEW DRIVE RIVERVIEW, FL 33569		
Current Mailing Address:			New Maili	New Mailing Address:		
4021 SOUTH DALE MABRY TAMPA, FL 33611				10520 RIVERVIEW DRIVE RIVERVIEW, FL 33569		
FEI Number	: 59-3484758	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and	l Address of	f New Registered Agent:	
	ENRY W 'ERVIEW DRIV 'W, FL 33569	E US				
	e named entity s e of Florida.	submits this statement for the	purpose of changing i	its registered	d office or registered agent, or both,	
SIGNATU	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () GILES, HENRY 4021 S DALE M TAMPA, FL 336	IABRY HWY	Title: Name: Address: City-St-Zip:	CEO GILES, HEN 10520 RIVEI RIVERVIEW	RVIEW DR	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	GILES, VIOL	() Change (X) Addition ETA G PRES. RVIEW DRIVE , FL 33569	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	GILES, JR.,	() Change (X) Addition HENRY G VP RVIEW DRIVE , FL 33569	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	GILES, JASC	RVIEW DRIVE	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY W. GILES CEO 01/05/2005