

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000010013

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** CARROLLWOOD BLACK BELT ACADEMY, INC.

**Current Principal Place of Business:**

12924 N DALE MABRY HWY  
TAMPA, FL 33618

**New Principal Place of Business:**

4125 GUNN HWY STE A1  
TAMPA, FL 33618

**Current Mailing Address:**

12924 N DALE MABRY HWY  
TAMPA, FL 33618

**New Mailing Address:**

4125 GUNN HWY STE A1  
TAMPA, FL 33618

**FEI Number:** 59-3560599

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MIRANDA, JEAN-LOUIS  
12924 N DALE MABRY HWY  
TAMPA, FL 33618 US

**Name and Address of New Registered Agent:**

MIRANDA, JEAN-LOUIS  
4125 GUNN HWY STE A1  
TAMPA, FL 33618 US

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.

SIGNATURE: JEAN-LOUIS MIRANDA

04/27/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MIRANDA, JEAN-LOUIS  
Address: 4125 GUNN HWY STE A1  
City-St-Zip: TAMPA, FL 33618

I hereby 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 all other like empowered.

SIGNATURE: JEAN-LOUIS MIRANDA

PRES

04/27/2010

Electronic Signature of Signing Officer or Director

Date