

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000023378

1. Entity Name

EXPLOSION'S CAPOEIRA ACADEMY, INC.

FILED
Jun 27, 2001 8:00 am
Secretary of State

06-27-2001 90006 015 ***150.00

A0075086

Principal Place of Business	Mailing Address
1369 E. SAMPLE ROAD POMPANO BEACH, FL 33064	1369 E. SAMPLE ROAD POMPANO BEACH, FL 33064

2. Principal Place of Business	3. Mailing Address
Suite Apt. #, etc.	Suite. Apt. #, etc.
City & State	City & State
Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0773767	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DOS SANTOS, CLEBER S. 1369 E. SAMPLE ROAD POMPANO BEACH, FL 33064	Name TAX HOUSE CORPORATION Street Address (P.O. Box Number is Not Acceptable) 3929 N. FEDERAL HWY City POMPANO BEACH FL Zip Code 33064

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.

SIGNATURE  PRESIDENT 05/01/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	FILE NOW! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
--	--	--	-----------------------------

11. OFFICERS AND DIRECTORS		12. ADDITIONS /CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PTDV	TITLE	
NAME	DOS SANTOS, CLEBER S.	NAME	
STREET ADDRESS	1369 E. SAMPLE ROAD	STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH, FL 33064	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(1), 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 11 or Block 12 N changed or on an attachment and on address, with all other like empowered.

SIGNATURE  05/01/01 (954) 783-3612
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
A-0075086

FLORIDA DEPARTMENT OF STATE
Division of Corporation
2001 Uniform Business Report (UBR)
409 East Gaines Street
Tallahassee, FL 32399

Re: Filing of Uniform Business Report 2001

P99000023378

EXPLOSION'S CAPOEIRA ACADEMY, INC.

To Whom It May Concern:

This letter is to inform you that we have never received a Uniform Business Report form in the mail.

We would like to request you that you forgive all extra fees and penalties other than the primary of \$150.00 and accept the filling of our attached UBR, which has been prepared by our accountant.

Any questions or concern, feel free to contact our accountant at (954) 782-4000 and speak to Mr. Breno Gomes.

Sincerely,



Cleber dos Santos - President
EXPLOSION'S CAPOEIRA ACADEMY, INC.
1369 E. Sample Road
Pompano Beach, FL 33064
Phone (954) 783-3612