

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000034179

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** AFTER SCHOOL KARATE PROGRAM, INC.

**Current Principal Place of Business:**

26246 US HWY 19  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

26246 US HWY 19  
CLEARWATER, FL 33761

**New Mailing Address:**

**FEI Number:** 59-3571208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOGDANOS, PENELOPE  
1414 EASTFIELD DR.  
CLEARWATER, FL 33764 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: BOGDANOS, PENELOPE  
Address: 1414 EASTFIELD DR.  
City-St-Zip: CLEARWATER, FL 33764

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: PENELOPE BOGDANOS

PRES

03/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date