

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000009199

FILED
Apr 16, 2004
Secretary of State

Entity Name: Z THERAPY AND FITNESS, INC.

Current Principal Place of Business:

1012 LUGO AVENUE
CORAL GABLES, FL 33156

New Principal Place of Business:

Current Mailing Address:

1012 LUGO AVENUE
CORAL GABLES, FL 33156

New Mailing Address:

FEI Number: 42-1572895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

ZELHOF, CARLA
1012 LUGO AVE
CORAL GABLES, FL 33156 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: CARLA ZELHOF

04/16/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZELHOF, CARLA
Address: 1012 LUGO AVENUE
City-St-Zip: CORAL GABLES, FL 33156

Title: D () Delete
Name: ZELHOF, RONALD P
Address: 1012 LUGO AVENUE
City-St-Zip: CORAL GABLES, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARLA ZELHOF

D

04/16/2004

Electronic Signature of Signing Officer or Director

Date