

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000067288

Entity Name: GET FIT TRAINING, INC.

FILED  
Jan 28, 2009  
Secretary of State

**Current Principal Place of Business:**

3251 SW 131 TERRACE  
DAVIE, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

3251 SW 131 TERRACE  
DAVIE, FL 33330

**New Mailing Address:**

FEI Number: 20-4877251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOLDBERG, ADAM S  
1792 BELL TOWER LANE  
WESTON TOWN CENTER  
WESTON, FL 33326 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: MR ( ) Delete  
Name: LEWIN, COREY  
Address: 3251 SW 131 TERRACE  
City-St-Zip: DAVIE, FL 33330

Title: MR ( ) Delete  
Name: GENTILE, JOSEPH  
Address: 9640 NW 7TH CIRCLE #2012  
City-St-Zip: PLANTATION, FL 33325

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: MR (X) Change ( ) Addition  
Name: GENTILE, JOSEPH  
Address: 500 NORTH CONGRESS AVENUE APT. A-104  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: COREY LEWIN

MR

01/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date