-FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

2. Principal Place of Business

699 5TH AVENUE SOUTH

Suite, Apt: #, etc.

City & State

Zip

NAPLES FL 34102



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000073473

TOTAL BODY SALON & SPA. INC.

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Mailing Address

NAPLES FL 34102

2a. Mailing Address

City & State

Suite, Apt. #, etc.

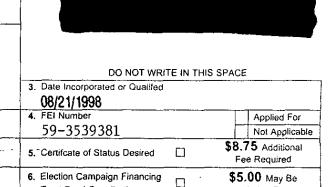
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699 5TH AVENUE SOUTH

FILED
Jun 09, 2000 8:00 am
Secretary of State

06-09-2000 90002 015 ***150.00



28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes the current year intangible Personal Property Tax. 30 ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Tri-Wealth Corporation SAN FILIPPO, N. PAUL Street Address (P.O. Box Number is Not Acceptable) 3461 Bonita Bay Blvd, #214 82 2150 GOODLETTE ROAD SUITE 305 83 NAPLES FL-34102 **R4** City Bonita Springs

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

5.3.00 Carlton H Smith, CEO SIGNATURE Signature, typed or printed or d agent and title if applicable DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1 1 TITLE NAME PASQUINO, JOYCE 1.2 NAME STREET ADDRESS 2113 IMPERIAL GOLF COURSE BLVD. 1.3 STREET ADDRESS NAPLES FL 34110 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change ☐ Addition n 2.1 TITLE DOANE, JOANN 2.2 NAME 750 MYRTLE TERRACE STREET ADDRESS 2.3 STREET ADDRESS NAPLES FL 34103 ST-ZIP 2. 4 CITY-ST-ZIP □ DELETE HILE 3.1 TIRE ☐ Change Addition PASQUINO, JOSEPH 3.2 NAME 2113 IMPERIAL GOLF COURSE BLVD. -------- ADDAESS 3,3 STREET ADDRESS NAPLES FL 34110 ST ZIP 3.4. CITY-ST-ZIF DELETE Change ☐ Addition 4.1 TITLE DOANE, JIM JR 4, 2 NAME 750 MYRTLE TERRACE 4.3 STREET ADDRESS ····LI ADDRESS NAPLES FL 34103 ST ZIP 4,4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS ILLI AUDRESS 5.4 CITY-ST-ZIP ST Z:D Addition DELETE 61 TITLE Change 6.2 NAME 6.3 STREET ADDRESS " : LADDRESS 6.4 CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changes, or on an attachment with an address, with all other like empowered.

SIGNATURE

Carlton H Smith, CEC

5.3-00

941/495-0123

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