

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000009776

**Entity Name:** COMPREHENSIVE FITNESS, INC.

**Current Principal Place of Business:**

358 SE ROGERS CT.  
STUART, FL 34994

**Current Mailing Address:**

P. O. BOX 2954  
JUPITER, FL 33468

**FEI Number: 32-0071034**

**Certificate of Status Desired: No**

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

ROBERT, BROWN  
105 S. NARCISSUS AVE  
SUITE #704  
WEST PALM BEACH, FL 33401 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            MALFREGEOT, ANGELIQUE L  
Address        P. O. BOX 2954  
City-State-Zip: JUPITER FL 33468

*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: ANGELIQUE MALFREGEOT**

**PRESIDENT**

**01/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date