

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000067288

**Entity Name:** GET FIT TRAINING, INC.

**Current Principal Place of Business:**

3251 SW 131 TERRACE  
DAVIE, FL 33330

**Current Mailing Address:**

3251 SW 131 TERRACE  
DAVIE, FL 33330

**FEI Number: 20-4877251**

**Certificate of Status Desired: No**

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

GOLDBERG, ADAM S  
1792 BELL TOWER LANE  
WESTON TOWN CENTER  
WESTON, FL 33326 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	MR	Title	MR
Name	LEWIN, COREY	Name	GENTILE, JOSEPH
Address	3251 SW 131 TERRACE	Address	521 ONE CENTER BLVD #105
City-State-Zip:	DAVIE FL 33330	City-State-Zip:	ALTAMONTE SPRINGS FL 32701

*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: COREY LEWIN**

**PRESIDENT**

**01/15/2016**

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

\_\_\_\_\_  
Date