FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT # 514827

(5)

NAUTILUS SPORTS FITNESS CENTER, INC.

Principal Place o	f Business	Mailing Address				I liffift fiilt trait tres serve man			
8100 S.W. 819 Miami Fl. 331		8100 S.W. B1ST. DRIV MIAMI FL 33143	Έ		ļ				
						3. Date Incorporated or Qualified 11/16/1976		of Last Re)3/08/19	95
2. Principal Plac	e of Business	2a. Mailing Address				4, FEI Number		⊢ +-	Applied For
]		26				59-1703813 Not Applicat \$8.75 Additional			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	n '			Certificate of Status Desired			Required
City & State		City & State				6. Election Campaign Financing		\$5.0	0 May Be
3		28				Trust Fund Contribution			d to Fees
Zıp	Country	Zip	Cou	ntry		8. This corporation has liability for	intangible ta No	ax under s	199.032,
4	25	29	30			Florida Statutes Yes 10. Name and Address of New F		Agent	
	9. Name and Address of Curre	ent Registered Agent		81 Nam		10, Name and Address of from .	iogioto.ou		
	Ì	1 1							
	, ROBERT A			62 Stree	t Addres	s (P.O. Box Number is Not Acceptat	энеј		
	N. 81ST. DRIVE			83					
MIAMI F	L 33143			04				85 Zi	ip Code
				84 City		tion submits this statement for the pu	FL	_	
	Signature, typed or printed han elof registered ago OFFICERS A	ent and title if applicable (NO NO DIRECTORS	OTE: Ringistered	Agent signatu	e required v	Arten reinstating ADDITIONS/CHANGES TO OF			
12.	OFFICERS A	ND DIRECTORS DELETE	1.11	ılı F		ADDITIONS/CHANGES TO G		Change	
NAME	GENTILE, ROBERT A.	_	1.2 N	AME					
STREET ADDRESS	8100 S.W. 81ST. DRIVE		1.3 S	TREET ADDRES	s				
CITY - ST - ZIP	MIAMI, FLORIDA 0		140	ITY-ST-ZIP				Chan in	☐ Addition
TOTALE	S	☐ DELETÉ	2 1 1					☐ Chan je	LT Addition
NAME	BEAN, GERALD		2.2 N						
STREET ADDRESS	8100 S.W. 81ST. DRIVE		1	TREET ADDRES	S				
CITY - ST - ZIP	MIAMI, FLORIDA 0	T DELETE		ITY-ST-ZIP IITLE				☐ Chan je	Addition
TOLE				IAME					
NAME STREET ADDRESS			33:	STREET ADDRE	ss				
CITY-ST-ZIP			340	HY-ST-ZIP				E7 01	Addit on
TITLE		☐ DELETE	4 1	TITLE				Change	Addition
NAME			I	IAME					
STREET ADDRESS				STREET ADDRE	38				
CITY-SF-ZIP		DELETE		HTY-ST-ZIP TITLE	+		· 	☐ Char ge	e 🔲 Addition
TRILE		[] Office		NAMÉ					
NAME etocci annecse				STREET ADDRE	ss				
STREET ADDRESS CITY-ST-ZIP			5.4	CITY-ST-ZIP					. [] (220)
TITLE		DELETE	6.1	TITLE				☐ Change	e [] Addition
NAME				NAME	Ì				
STREET ADDRESS			1	STREET ADDRE	SS				
C-TY-ST-ZiP		1 10 state films to color to the fi	6.4	CITY-SI-ZIP	qualify fo	or the exemption stated in Section 1	9.07(3)(k).	Florida S.a	tutes. I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida S'atutes. 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 cath; that I am an office 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 changed, or on an attachment with an address.

SIGNATURE:

WATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

ROBERT A GENTILE PROS 1/25/96 305-575-1234

CR2E034 (12/95)