2000 UNIFORM BUSINESS REPORT (UBR)

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2. Friended Place of Bysiness Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State DO NOT WRITE IN THIS SPACE Appared For Next Applicable Appared For Next Applicable See Required S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Registered Registere	12594 PINES BLVD. 12594 PINES BLVD.												
City & Stato City & Stato Country Co	2. Principal Place of Business 3. Mailing Address						146		1 910 (0119 1011) 8611) 01)	610 1010 1017 1016 1	8 1 13 8 1	
Signature Sign							_	DO NOT WRITE IN THIS SPACE					
Secondary Seco	City & State City & State							4. FEI Number	· · · · · · · · · · · · · · · · · · ·				
GRUVMAN, EDUARDO 12594 PINES BLVD. PEMBROKE PINES FL 33027 City FL Zip Code 8. The above named entity automits this statement for the purpose of changing its registered office or registered agant, or both, in the State of Florida. SIGNATURE 9. Capital Contributions as Shown on record. 9. Capital Contributions as Shown on record. NOTE: General Partners HAY NOT be changed on the form; an amendment must be filled to change a general partner. 12. GEREAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY 15. GENERAL PARTNER INFORMATION 15. ADDRESS CHANGES ONLY 16. STREF ADDRESS 17. STREF ADDRESS 18. S	Zip Country			Zip		Coun	ntry	5 Certificate of Status Desired \$8.75 Additional					
8. 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 Signature types or printer name of implified agent and 50% 4 agestable. 9. Capital Contributions \$370,000.00 10. Amount of Capital Contributions as Shown on record. A GENERAL PARTINER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner. 12. GENERAL PARTINER INFORMATION 19. ADDRESS CHANGES ONLY DODAMENT P80000071551 FITNESS WAREHOUSE OF TAMPA, INC. SIRET ADDRESS OTY-ST-ZP DODAMENT SIRET ADDRESS SIRET ADDRESS OTY-ST-ZP DODAMENT SIRET ADDRESS SI	GRUVMAN, EDUARDO 12594 PINES BLVD.						Name						
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CITY-ST-ZIP 14. 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				athin 201				Castion 110 07/0\(\frac{1}{2}\)	Clorido Clotuta	1 further a	the that the information	ation	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE: X

X 2/29/2020 X 95 4 4 3 9 0 0 3 5

Date Daytime Phone #