

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F03000002944

**FILED**  
**Mar 01, 2009**  
**Secretary of State**

**Entity Name:** FITNET INTERNATIONAL CORPORATION

**Current Principal Place of Business:**

669 TREEHOUSE CIRCLE  
SAINT AUGUSTINE, FL 320956837

**New Principal Place of Business:**

**Current Mailing Address:**

669 TREEHOUSE CIRCLE  
SAINT AUGUSTINE, FL 320956837

**New Mailing Address:**

669 TREEHOUSE CIRCLE  
SAINT AUGUSTINE, FL 320956837

**FEI Number:** 88-0335406

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESPINOSA-PEREZ, LILIA  
7108 SW 127 PLACE  
MIAMI, FL 33183 US

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

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:** LILIA ESPINOSA-PEREZ

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** ESPINOSA, RAUL  
**Address:** 669 TREE HOUSE CIRCLE  
**City-St-Zip:** SAINT AUGUSTINE, FL 320956837

**Title:** D ( ) Delete  
**Name:** ESPINOSA-PEREZ, LILIA  
**Address:** 7108 SW 127 PLACE  
**City-St-Zip:** MIAMI, FL 33183

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** P (X) Change ( ) Addition  
**Name:** ESPINOSA, RAUL  
**Address:** 669 TREEHOUSE CIRCLE  
**City-St-Zip:** SAINT AUGUSTINE, FL 320956837

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** RAUL ESPINOSA

**PRES**

**03/01/2009**

Electronic Signature of Signing Officer or Director

Date