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(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Submode Smary Harrier)						
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COVER LETTER

Division of Corporations					
SUBJECT: Amglad Health and Fitness Corporation					
(Name of corporation - must include suffix)					
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.					
Please return all correspondence concerning this matter to the following:					
Rodney L. Russell					
(Name of Person)					
Russell Law Offices, P.A.					
(Firm/Company)					
1030 North Orange Avenue, Suite 102					
(Address)					
Orlando, Florida 32801					
(City/State and Zip code) For further information concerning this matter, please call:					
Sharon Wilson at (407) 422-1234					
(Name of Person) (Area Code & Daytime Telephone Number)					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$\ \tag{S78.75 Filing Fee & \tag{S78.75 Filing Fee & \tag{Certificate of Status}}\$\$ Certificate of Status Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy					

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1Amglad Health and Fitness Corporation . (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")						
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)					
2.						
	Nevada 3. 76-0777680 (State or country under the law of which it is incorporated) (FEI number, if applicable)					
4.	January 18, 2005 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")					
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")					
6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)						
7.	1784 Sparkling Water Circle, Ocoee, Florida 34761					
(Principal office address)						
1784 Sparkling Water Circle, Ocoee, Florida 34761						
	(Current mailing address)					
8.	Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)					
9.	Name and <u>street address of Florida</u> registered agent: (P.O. Box <u>NOT</u> acceptable)					
	Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Russell Law Offices, P.A.					
0	ffice Address: 1030 North Orange Avenue, #102					
	Orlando Florida 32801 (Zip code)					

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTO	ors	· · · · · · · · · · · · · · · · · · ·	- ·- ·-
Chairman:			
Address:			j.
•	:		
Address			*
			
Director:	John C. Ferraro	·	
	1784 Sparkling Water Circle, Occee,		E E
			₩ N N
			SEL
			TE F
B. OFFICER	RS		F. FLORIDA
President:	Jake D. Appel		
Address:	133 East Robinson Street, Orlando, F	Florida 32801	
			•
	·		
Address:			
		- <u>-</u>	_1.3
Secretary:	John C. Ferraro		
Address:	1784 Sparkling Water Circle, Ocoee,	Florida 34761	
Treasurer:	John C. Ferraro		
Address:	1784 Sparkling Water Circle, Ocoee,	Florida 34761	
NOTE: He	ecessary, you may attach an addendum to the applic	ation listing additional officers	and/or directors.
13.	(Signature of Director or Officer listed in	number 12 of the application)	;
	•	number 12 of the application)	
14	John C. Ferraro, Director (Typed or printed name and capacity of	person signing application)	
	(- 2 th)	, U U "FF" ==)	

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, AMGLAD HEALTH AND FITNESS CORPORATION, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 18, 2005, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 24, 2005.

DEAN HELLER Secretary of State

Ву

Unite Ollahusa Certification Clerk