## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	1997	DIVI	Secretary of State DIVISION OF CORPORATIONS				Secretary of State			
1. Corporation	MENT # F8 Name TA FITNESS CENT	0462 (7 TER, INC.	7)				1 1481 1881 BURK 24806 BURK 1881	1111 (111 111 111 111 1	1811 B1416 1881	
Principal Place	e of Business	Mailing Addres	29			[ [ [ [ [ ] ] ] ]				
, i		•	1013 W 15TH STREET							
1013 W 15TH STREET						1				
						3. Date Inc	orporated or Qualified	3a. Date of Las	. ' ' .	
2. Principal Pi	lace of Business	ļ	2a. Mailing Address			4. FEI Num	ber		Applied For	
21			26			59-2	189498		Not Applicable	
Suite Apt	# etc.	<b>├</b>	Suite, Apt. #, etc.			6. Certifica	te of Status Desired		5 Additional Regulred	
City & State	C	City & State	<del></del>		·	6. Flection	Campaign Financing		O May Be	
23		28				I	nd Contribution		ed to Fees	
Zφ	Country	Zip		ountry	·	8. This cor	poration has liability for i	ntangible tax unde	rs. 199.032,	
24	25 29 30				Florida Statutes Yes No					
ļ		s of Current Registered Agen		81	Name	10. Name a	nd Address of New Re	gistered Agent		
	, SOON HO	·								
1013 W. 15TH STREET					Street Ad	ddress (P.O. Box I	Number is Not Acceptab	le)		
PAN	IAMA CITY FL 32401			83	···					
								· · · · · · · · · · · · · · · · · · ·		
1				84	City			FL 85 Z	ip Code	
11. Pursuant i	to the provisions of Section	ons 607.0502 and 607.1508, Flo	rida Statutes, the	above-	named o	orporation submits	this statement for the p	urpose of changin	g its registered	
agent La	egistered agent, or boin, m familiar with, and acce	in the State of Florida. Such cha the obligations of, Section 60	7.0505 Florida S	zeo by t Italules:	ne corpo	ration's board of C	Directors: I hereby accep	n the appointment	as registered	
SIGNATURE	1-2	4) 2	200u	HO	LEE	OWNER	PRESIDENT	4/2	8/97	
12.	lagrature. Upod or printed name of Office	registered agent and title II applicable. FICERS AND DIRECTORS		ered Ageni 3.	signature re	quired when reinstaling)	NS/CHANGES TO OFFIC	DATE PERSONNEL PROPERTY	OBS IN 12	
TITLE	D			1 TITLE	T	7,007,0	10,010 41020 10 01110	☐ Chang		
NAME .	LEE, MAL KUN		1:	2 NAME						
STREET ADDRESS	1013 W 15TH STRE	ET .	Ē 1.3	3 STREET AL	DDRESS				ľ	
COY-S1-Zif	PANAMA CITY, FL4		1.	4 CITY - ST-	ZIP					
HILE	<b>DP</b> □ DELETE 2:		1 TITLE				Chang	e Addition		
NAME	LEE, SOON HO		<b>I</b>	2 NAME						
STREET ADDRESS	1013 W 15TH STRE		1 7	3 STREET A			.**			
Chiy-SI-ZiP	PANAMA CITY, FL	18888 <u>32401</u>		4 CITY-ST	- ZIP	<del></del>		Chang	ge Addition	
TOLE NAME				1 TITLE 2 Name	1				to TT vodition	
STREET ADDRESS				2 NAME 3 STREET A	DDBESS					
Left - ST- ZIP				4. CITY-ST-					1	
TI'LE				1 TITLE				Chang	je Addition	
N4M <del>(</del>			4.	2 NAME					Ì	
STREET ALCORESS			4.	3 STREET A	DDRESS					
City St-2iP				4 CITY - ST-	ZIP	····				
Tille				1 TITLE				☐ Chang	je 🔲 Addition	
NAMi				2 NAME					J	
STREET ACIDRESS				3 STREET A	1				1	
CITY - ST - ZI-1				4 CITY-ST-	ZIP	<del></del>	·	☐ Chan	je 🔲 Addition	
TILE		ليا	•	1 TITLE	1			LI Unang	le The Magning	
NAME CONTRACTOR				S NAME	DDDEED	·				
STREET ADDRESS			6.	3 STREET A	DOMESS.					

14. Los 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 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 oath; that I am an other 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.

May 08 1997 8:00am