Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90214 041 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G04056

1. Corporation Name

THE SPORTS AND FITNESS CLINIC, INC.

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9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Street Address (P.O. Box Number is Not Acceptable) 13. Pursuant to the provisions of Sections 607.0502 and 507.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and malilar with, and except the obligations of, Oscion for 7.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and malilar with, and except the depointment as registered agent, and malilar with, and except the depointment as registered agent, and malilar with, and except the depointment as registered agent, and malilar with, and except the depointment as registered agent, and malilar with, and except the depointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and an advanced by the corporation's board of directors. I hereby accept the appointment as registered agent, and advanced by the corporation's board of directors. I hereby		Country	-	Zip	Cou	ntrv	•	٠,				
10, Name and Address of Current Registered Agent 10, Name and Address of New Registered 10, Name and Nam			<u> </u>	- -	_	,		, '	•		□No	
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S975 N FEDERAL HWY FT LAUDERDALE FL 33308 82						81	Name					
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a manufactor with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature Description name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	5975	N FEDERAL HWY					Street A	ddress	(P.O. Box Number is Not Acceptable)			
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14. 1 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all properties the proposed of the corporation 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, with all properties of the corporation or the receiver or trustee empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR