


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

FILED
Jul 03 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # *H46310*
1. Corporation Name
the Plantation Fitness Center, Inc.

Principal Place of Business
*4050 West Broward Blvd
Plantation, FL 33317*

Mailing Address
*7411 N.W. 11th Ct
Plantation, FL 33313*

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified <i>Feb 1985</i>	3a. Date of Last Report <i>May 1996</i>
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number <i>59-2515752</i>	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <i>Alexander Ensign 7411 NW 11th Ct Plantation, FL 33313</i>	10. Name and Address of New Registered Agent
B1 Name	
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	FL B5 Zip Code

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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<i>Donald Ensign</i> <input type="checkbox"/> DELETE	1.1 TITLE	<i>V.P.</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<i>Donald</i>	1.2 NAME	<i>Alexander Ensign</i>
STREET ADDRESS	<i>Donald</i>	1.3 STREET ADDRESS	<i>7411 NW 11th Ct.</i>
CITY-ST-ZIP	<i>Plantation, FL 33313</i>	1.4 CITY-ST-ZIP	<i>Plantation, FL 33313</i>
TITLE	<i>Alexander Ensign</i> <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>Alexander Ensign</i>	2.2 NAME	
STREET ADDRESS	<i>7411 NW 11th Ct</i>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<i>Plantation, FL 33313</i>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 registered agent 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alexander Ensign

6/20/97

(954) 791-3035

CR2E034 (9/96)