## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# K56992

FILED Apr 30, 2004 Secretary of State

Entity Name: BODY DESIGN FITNESS CENTER INC.

Current Principal Place of Business:		New Principal Place of Business:		
	ST S.R. 46 D, FL 32771	US		
urrent N	lailing Addre	ss:	New Mailing Addre	ss:
	ST S.R. 46 D, FL 32771	US		
El Number	: 59-2923183	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	IGER, HARVE RBY DRIVE			
	TO, FL 32776  e named entity		purpose of changing its register	red office or registered agent, or both,
he above	·		purpose of changing its register	red office or registered agent, or both,
he above the Stat	e named entity e of Florida. RE:	submits this statement for the		
he above the Stat IGNATU	e named entity e of Florida. RE: Electro			red office or registered agent, or both,  Date
he above the Stati IGNATU	e named entity e of Florida. RE: Electro	submits this statement for the nic Signature of Registered Ag	ent	
he above the State IGNATU  DESTRUCTION  DEST	e named entity e of Florida.  RE: Electro  mpaign Financii  S AND DIREC  S ( TERWILLIGEI 25120 DERBY SORRENTO, I	submits this statement for the onic Signature of Registered Aging Trust Fund Contribution ( ).  CTORS:  ) Delete R, AILEEN / DRIVE FL ) Delete	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title:	Date
he above the Stati IGNATU ection Car FFICER tle: ame: ddress: ty-St-Zip:	e named entity e of Florida.  RE:  Electro  mpaign Financii  S AND DIREC  S ( TERWILLIGEI 25120 DERBY SORRENTO, I	r submits this statement for the spinic Signature of Registered Aging Trust Fund Contribution ( ).  CTORS:  ) Delete R, AILEEN / DRIVE FL ) Delete R, HANEY / DRIVE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: H. TERWILLIGER PRES 04/30/2004