

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2003 8:00 am
Secretary of State

04-17-2003 90028 026 *****50.00

DOCUMENT # L02000029457

1. Entity Name
CREATION STATION GYM, LLC



Principal Place of Business
11203 49TH ST. N.
CLEARWATER FL 33762

Mailing Address
11203 49TH ST. N.
CLEARWATER FL 33762

44001497



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

11650 79TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State **Seminole Florida**

4. FEI Number

11-3678816

Applied For
Not Applicable

Zip

Country

Zip

Country

33772

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAQUEL TERESA GUZMAN
11650 79TH AVE.
SEMINOLE FL 33772

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PARTNER
RAQUEL T. GUZMAN
11650 79TH AVE
SEMINOLE FL 33772

☐ Delete

TITLE
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STREET ADDRESS
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11. I 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4/15/03 727 398 2768

CR2E083 (10/02)