

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L02839

Entity Name: JUST FIT, INC.

FILED
Jan 10, 2007
Secretary of State

Current Principal Place of Business:

3418 WEST BAY TO BAY BLVD
TAMPA, FL 33611 US

New Principal Place of Business:

Current Mailing Address:

3418 WEST BAY TO BAY BLVD
TAMPA, FL 33611 US

New Mailing Address:

FEI Number: 59-2955253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, BERNADINE M
118 MARTINIQUE AVE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HOLMES, MARY ROSE
Address: 5800 GORDON AVENUE
City-St-Zip: TAMPA, FL 33611 US

Title: VP () Delete
Name: WARD, SHERI
Address: 3116 DORCHESTER AVE.
City-St-Zip: TAMPA, FL 33611 US

Title: ST () Delete
Name: HOLMES, DWIGHT
Address: 5800 GORDON AVE.
City-St-Zip: TAMPA, FL 33611 US

Title: V () Delete
Name: WRIGHT, BERNADINE M
Address: 118 MARTINIQUE AVE
City-St-Zip: TAMPA, FL 33606 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WARD, SHERI
Address: 5800 GORDON AVENUE
City-St-Zip: TAMPA, FL 33611 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BERNADINE M. WRIGHT

V

01/10/2007

Electronic Signature of Signing Officer or Director

Date