2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004208

Entity Name: MMI FITNESS LLC

FILED Aug 08, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

230 OAK ROAD 49 KEEBLE AVE WINTER SPRINGS, FL 32708 BEBARY, FL 32713

Current Mailing Address: New Mailing Address:

230 OAK ROAD 49 KEEBLE AVE WINTER SPRINGS, FL 32708 DEBARY, FL 32713

FEI Number: 13-4237348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INGRASSIA, MICHELLE
230 OAK ROAD
49 KEEBLE AVE
WINTER SPRINGS, FL 32708
DEBARY, FL 32713

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: MICHELLE INGRASSIA 08/08/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete Name: INGRASSIA, MICHELLE

Address: 230 OAK ROAD City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM () Delete
Name: INGRASSIA, MARK
Address: 230 OAK ROAD

City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition

Name: INGRASSIA, MICHELLE Address: 49 KEEBLE AVE City-St-Zip: DEBARY, FL 32713

Title: MGRM (X) Change () Addition

Name: INGRASSIA, MARK Address: 49 KEEBLE AVE City-St-Zip: DEBARY, FL 32713

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 is true and accurate and that my electronic 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: MARK INGRASSIA MGRM 08/08/2004