

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056961

Entity Name: PRO-FIT GROUP, LLC

FILED
Mar 21, 2006
Secretary of State

Current Principal Place of Business:

17430 SW 54 STREET
SOUTHWEST RANCHES, FL 33331

New Principal Place of Business:

3445 N. HIATUS RD.
SUNRISE, FL 33351

Current Mailing Address:

3445 N. HIATUS RD.
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 51-0517561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, TAMI
17430 SW 54 STREET
SOUTHWEST RANCHES, FL 33331 US

Name and Address of New Registered Agent:

JONES, TAMI
3445 N. HIATUS RD.
SUNRISE, FL 33351 US

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: TAMI J JONES

03/21/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JONES, TAMI
Address: 17430 SW 54 STREET
City-St-Zip: SOUTHWEST RANCHES, FL 33331

Title: MGRM () Delete
Name: STENBACK, GINA
Address: 12646 SW 28 CT.
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JONES, TAMI
Address: 3445 N. HIATUS RD.
City-St-Zip: SUNRISE, FL 33351

Title: MGRM (X) Change () Addition
Name: STENBACK, GINA
Address: 3445 N. HIATUS RD.
City-St-Zip: SUNRISE, FL 33351

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 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: TAMI J JONES

PRES

03/21/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date