

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083823

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: HYPOLUXO FITNESS CENTER LLC

## Current Principal Place of Business:

101 NORTH LAKESIDE DRIVE  
LAKE WORTH, FL 33460

## New Principal Place of Business:

125 HYPOLUXO RD.  
F  
HYPOLUXO, FL 33462

## Current Mailing Address:

101 NORTH LAKESIDE DRIVE  
LAKE WORTH, FL 33460

## New Mailing Address:

101 NORTH LAKESIDE DRIVE  
6  
LAKE WORTH, FL 33460

FEI Number: 59-3789202

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ASHFORD, DONNA  
101 NORTH LAKESIDE DRIVE  
LAKE WORTH, FL 33460 US

## Name and Address of New Registered Agent:

ASHFORD, DONNA  
101 NORTH LAKESIDE DRIVE  
6  
LAKE WORTH, FL 33460 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: DONNA J. ASHFORD

01/07/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: ASHFORD, DONNA  
Address: 101 NORTH LAKESIDE DRIVE  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES:

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 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: DONNA J. ASHFORD

OWNE

01/07/2005

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