

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000089782

FILED
Apr 05, 2012
Secretary of State

Entity Name: FULL CONTACT FITNESS LLC

Current Principal Place of Business:

242 N. KROME AVE.
FLORIDA CITY, FL 33034

New Principal Place of Business:

80 SW 9TH AVE.
HOMESTEAD, FL 33030

Current Mailing Address:

242 N. KROME AVE.
FLORIDA CITY, FL 33034

New Mailing Address:

80 SW 9TH AVE.
HOMESTEAD, FL 33030

FEI Number: 26-3468563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOCANEGRA, FELICIANO
18786 SW 344TH DRIVE LOT#169
FLORIDA CITY, FL 33034 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: BOCANEGRA, FELICIANO JR.
Address: 18786 SW 344TH DRIVE LOT#169
City-St-Zip: FLORIDA CITY, FL 33034

I hereby 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: FELICIANO BOCANEGRA JR.

CEO

04/05/2012

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