

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000051068

Entity Name: FUZION FITNESS LLC

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

769 NW 89TH AVE.  
BUILDING 5  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

769 NW 89TH AVE.  
BUILDING 5  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 27-0551552

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIEGEL, JODIE M ESQ.  
C/O VINNY EMANUELE, 9236 NW 49TH PLACE  
SUNRISE FLORIDA, FL 33351 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: EMANUELE, VINNY  
Address: 769 NW 89TH AVE., BUILDING 5  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM  
Name: EMANUELE, VINNY  
Address: 769 NW 89TH AVE., BUILDING 5  
City-St-Zip: PLANTATION, FL 33324

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: VINNY EMANUELE

MGR

04/20/2012

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