

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000090975

Entity Name: XCLUSIVE FITNESS LLC

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4923 82ND PL E  
SARASOTA, FL 34243 US

**New Principal Place of Business:**

**Current Mailing Address:**

4923 82ND PL E  
SARASOTA, FL 34243 US

**New Mailing Address:**

FEI Number: 27-0968330      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

AISCOWITZ, COREY J  
4923 82ND PL E  
SARASOTA, FL 34243 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: AISCOWITZ, COREY J  
Address: 4923 82ND PL E  
City-St-Zip: SARASOTA, FL 34243 SQ

Title: MGR  
Name: SOLIS, STAR S  
Address: 4923 82ND PL E  
City-St-Zip: SARASOTA, FL 34243

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: COREY AISCOWITZ

MGR

05/03/2010

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