

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000130618

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** MUSCLE MEALS FITNESS, LLC

**Current Principal Place of Business:**

50 SW 10TH STREET #812  
MIAMI, FL 33130

**New Principal Place of Business:**

1111 SW 1 AVE  
APT 3424  
MIAMI, FL 33130

**Current Mailing Address:**

50 SW 10TH STREET #812  
MIAMI, FL 33130

**New Mailing Address:**

1111 SW 1 AVE  
APT 3424  
MIAMI, FL 33130

**FEI Number:** 49-4026525

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JONES, MARK  
50 SW 10TH STREET #812  
MIAMI, FL 33130 US

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

JONES, MARK  
1111 SW 1ST AVE  
APT 3424  
MIAMI, FL 33130 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: MARK J. JONES

05/01/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JONES, MARK  
Address: 1111 SW 1ST AVE APT # 3424  
City-St-Zip: MIAMI, FL 33130

Title: MGRM  
Name: JONES, MARK  
Address: 1111 SW 1ST AVE APT # 3424  
City-St-Zip: MIAMI, FL 33130

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: MARK JONES

MGRM

05/01/2012

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