

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000041381

FILED
Jun 17, 2005
Secretary of State

Entity Name: ALL WOMEN'S PERSONAL TRAINING CENTER, INC.

Current Principal Place of Business:

924 W.S.R. 436
1800
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

626 STANHOPE DRIVE
CASSELBERRY, FL 32707

New Mailing Address:

1026 PINEHURST CT
OVIEDO, FL 32765

FEI Number: 59-3642607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOSTELYK, PHILLIP
626 STANHOPE DRIVE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

KOSTELYK, PHILLIP
1026 PINEHURST CT
OVIEDO, FL 32765 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: PHILIP KOSTELYK

06/17/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KOSTELYK, PHILLIP
Address: 626 STANHOPE DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: VP () Delete
Name: KOSTELYK, REBECCA
Address: 626 STANHOPE DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: M (X) Delete
Name: DEQUATTO, JENNIFER
Address: 2929 BERMUDA AVE
City-St-Zip: APOPKA, FL 32703

Title: S () Delete
Name: HEARON, LISA
Address: 859 LAKE JACKSON CIR
City-St-Zip: APOPKA, FL 32703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KOSTELYK, PHILLIP
Address: 1026 PINEHURST CT
City-St-Zip: OVIEDO, FL 32765

Title: VP (X) Change () Addition
Name: KOSTELYK, REBECCA
Address: 1026 PINEHURST CT
City-St-Zip: OVIEDO, FL 32765

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHILIP KOSTELYK

PRES

06/17/2005

Electronic Signature of Signing Officer or Director

Date