

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90156 008 ***150.00

DOCUMENT # **P00600065252**
1. Entity Name
ULTIMATE Fitness Enterprises, Inc.
10825 SW 112 Ave #318
Miami, FL 33176

Principal Place of Business Mailing Address
ULTIMATE Fitness Enterprises, 10825 SW 112 Ave #318
10825 SW 112 Ave #318 Inc. Miami, FL 33176
Miami, FL 33176

2. Principal Place of Business 3. Mailing Address
10825 SW 112 Ave. **10825 SW 112 Ave.**

Suite, Apt. #, etc. Suite, Apt. #, etc.
#318 **#318**

City & State City & State
Miami, FL **Miami, FL**

Zip Country Zip Country
33176 Dade **33176 Dade**

4. FEI Number Applied For
65-1040401 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Alexandra Sierra
10825 SW 112 Ave
#318
Miami, FL 33176

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **Pres - Vice Pres. Treas. Secretary** ☐ Delete
NAME **Alexandra Sierra**
STREET ADDRESS **10825 SW 112 Ave #318**
CITY-ST-ZIP **Miami, FL 33176**

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Alexandra Sierra**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/01 (786) 514-1460

Date

Daytime Phone #

CR2E034 (11/00)