

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000081111

FILED
May 01, 2007
Secretary of State

Entity Name: LEAN ON ME FITNESS, INC.

Current Principal Place of Business:

112 VALENCIA AVE.
MIAMI, FL 33134

New Principal Place of Business:

Current Mailing Address:

112 VALENCIA AVE.
MIAMI, FL 33134

New Mailing Address:

FEI Number: 27-0000895 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONGEOTTI, MARIA
13850 SW 102 LANE
MIAMI, FL 33186 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

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: P () Delete
Name: GREER, GLENN
Address: 13850 SW 102 LANE
City-St-Zip: MIAMI, FL 33186

Title: PV () Delete
Name: BEHAR, LUIS
Address: 7945 SW 104 ST # C-108
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PV (X) Change () Addition
Name: BEHAR, LUIS
Address: 4766 NW 97 PLACE
City-St-Zip: DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LUIS BEHAR

VP

05/01/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date