

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

03-12-2002 90994 021 ***158.75

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DOCUMENT # P01000021176

1. Entity Name
HEALTH CLUBS OF AMERICA FRANCHISE CORPORATION

Principal Place of Business
**2400 E. COMMERCIAL BLVD.
 SUITE 808
 FORT LAUDERDALE FL 33308**

Mailing Address
**2400 E. COMMERCIAL BLVD.
 SUITE 808
 FORT LAUDERDALE FL 33308**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

500 E. Broward Blvd. Ste 1650

500 E. Broward Blvd. Ste 1650

City & State

City & State

Ft Lauderdale, FL

Ft Lauderdale, FL

Zip

Country

Zip

Country

33394 Broward

33394 Broward

DO NOT WRITE IN THIS SPACE

4. FEI Number

Applied For

65-1091686

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KANOUSE, KEITH J
 ONE BOCA PLACE, SUITE 324 ATRIUM
 2255 GLADES ROAD
 BOCA RATON FL 33431**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

State

Zip Code

**Roger Wittenbens
 500 E. Broward Blvd. Ste. 1650
 Fort Lauderdale, FL 33394**

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

Roger Wittenbens, President 2-27-02

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **WITTENBERNS, ROGER**
 STREET ADDRESS **2400 E. COMMERCIAL BLVD., SUITE 808**
 CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE ☐ Change ☐ Addition
 NAME **500 E. Broward Blvd. Ste. 1650**
 STREET ADDRESS **Ft Lauderdale, FL-33394**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 an other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Roger Wittenbens, President 2-27-02 954-527-5373

Date

Daytime Phone #

CR2E034 (9/01)