2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2011
Secretary of State

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Entity Name: HEALTH CLUBS OF AMERICA FRANCHISE CORPORATION

Current Principal Place of Business:

500 E. BROWARD BLVD., STE. 1650
FT. LAUDERDALE, FL 33304 US

New Principal Place of Business:

Current Mailing Address:

550 SOUTH DIXIE HIGHWAY
SUITE 300
CORAL GABLES, FL 33146 US

New Mailing Address:

FEI Number: 65-1091686 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GERSHMAN, DAVID
550 SOUTH DIXIE HIGHWAY
SUITE 300
CORAL GABLES, FL 33146 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

OFFICERS AND DIRECTORS:

Title: PD
Name: WEBER, GERALD
Address: 500 E. BROWARD BLVD., STE. 1650
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D
Name: VANDENBERG, JR., PETER
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300
City-St-Zip: CORAL GABLES, FL 33146 US

Title: SD
Name: GERSHMAN, DAVID
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300
City-St-Zip: CORAL GABLES, FL 33146 US

Title: AS
Name: DENNIS, PHYLLIS G
Address: 550 SOUTH DIXIE HIGHWAY, SUITE 300
City-St-Zip: CORAL GABLES, FL 33146 US

I hereby 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 all other like empowered.

SIGNATURE: PHYLLIS G. DENNIS AS 01/28/2011

Electronic Signature of Signing Officer or Director Date