UN DOCU 1. Entity Nan		FIT CORPOR ESS REPOR 00025222	RATION T (UBR)		FILED Mar 12, 2003 8:00 an Secretary of State 03-12-2003 90071 032 ***150.00		
Principal Place of Business 125 SW 26 RD MIAMI FL 33129		Mailing Address 125 SW 26 RD MIAMI FL 33129					
2. Principal F	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State		4 . F	El Number 65-1082357 Applied For		
Zip	Country	Zip	Country	5. 0	Certificate of Status Desired Status Desired Fee Required		
	6. Name and Address of Currer	at Registered Agent	Name		lame and Address of New Registered Agent		
MITCHELI 125 SW 2	L, MONICA 26 RD			ss (P.O. Bo	ox Number is Not Acceptable)		
Miami Fl	33129		City		FL Zip Code		
SIGNATURE	Signature, typed or printegname of registered agent.	and title if applicable. (NOT	s registered office or reg		ent, or both, in the State of Florida. I am familiar with, and accept nstating) DATE 9. Election Campaign Financing\$5.00 May Be		
Make Check	Payable to Florida Department o				Trust Fund Contribution.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MITCHELL, MONICA 125 SW 26 RD MIAMI FL 33129		11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD[DITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS ÇITY-ST-ZIP		Change Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP		Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	24	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition		
12. Thereby ce indicated c of the corp changed, c	JRE: ////////////////////////////////////	This thing does not qualify for strue and accurate and that no overed to execute this report with an other like empowered.	RED	Section 11 le same le 107, Florida	19.07(3)(i), Florida Statutes. I further certify that the information gal effect as if made under oath; that I am an officer or director a Statutes; and that my name appears in Block 10 or Block 11 if 3/09/03 Date Daytime Phone #		