

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046269

FILED
May 01, 2009
Secretary of State

Entity Name: PERFECT BALANCE FITNESS, INC.

Current Principal Place of Business:

4008 AURORA ST
MIAMI, FL 33146

New Principal Place of Business:

5900 SUNSET DRIVE
MIAMI, FL 33143

Current Mailing Address:

4008 AURORA ST
MIAMI, FL 33146

New Mailing Address:

5900 SUNSET DRIVE
MIAMI, FL 33143

FEI Number: 75-3013700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGON, ALFREDO J
4008 AURORA STREET
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

AGON, ALFREDO J
5900 SUNSET DRIVE
CORAL GABLES, FL 33143 US

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: ALFREDO J. AGON

05/01/2009

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: DPTS () Delete
Name: AGON, ALFREDO
Address: 4008 AURORA ST.
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change () Addition
Name: AGON, ALFREDO
Address: 5900 SUNSET DRIVE
City-St-Zip: MIAMI, FL 33143

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: ALFREDO J. AGON

CEO

05/01/2009

Electronic Signature of Signing Officer or Director

Date