2002	unipunni Busi	المراجعة المحتوية المحافظ فتحافظ	م و مید شده م	•
DOCUN I. Entity Name CLUB FIT I	1ENT # P0100 NO. 5, INC.	00/7768		FILED May 06, 2002 8:00 am Secretary of State 05-06-2002 90176 030 ***150.00
	d. Todd & Singer, P.L. Circle. Suite 801	Mailing Address C/O KRONGOLD. TODD & SINGER. P.L. 201 ALHAMBRA CIRCLE, SUITE 801 CORAL GABLES FL 33134		
Sujte, Apt. #,	Military Trail	3. Mailing Address 9900 Griffin I Suite, Apt. #, etc.	2d - 1	DO NOT WRITE IN THIS SPACE
City & State Boynton ^{Zip} 33436	Beach, Fl Country USA	City & State Cooper City, Fe Zip 33328	Country	4. FEI Number Applied For 65-1122753 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
55150	6. Name and Address of Current F		Name	7. Name and Address of New Registered Agent
201 ALHAM	D, TODD & SINGER, P.L. IBRA CIRCLE, SUITE 801 BLES FL 33134			Address (P.O. Box Number is Not Acceptable)
			City	FL Zip Code
9. This corpora	ignature, typed or printed name of registered agent at ation is eligible to satisfy its Intangible quirement and elects to do so. on back)	FILE NOW !!! f After May 1 2002 Make Check Payable i	-EE IS \$150.0 Fee will be \$5	Trust Fund Contribution. Added to Fees
TITLE NAME STREET ADDRESS	D CAPATO, ANTONIO 10004 PINES BLVD. PEMBROKE PINES FL 33024	Delete	TITLE NAME STREET ADORESS GITY - ST - ZIP	Bownton Beach, Elorida 33436
TITLE NAME STREET ADDRESS CITY-ST-ZIP		🗔 Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/S/T CAPATO, R. NICHOLAS 9804 S. Military Trail, Suite E2.1-E2.9 Bounton Posch Elerida 33436
TITLE NAME STREET ADORESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/CEO LEONARD, PHIL
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 🗋 Additio
13. Thereby ce indicated c of the corp		wered to execute this report as		stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information II have the same legal effect as if made under oath; that I am an officer or director Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if
SIGNAT		RINTED NAME OF SIGNING OFFICER OR		Date Dayline Phone #