

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90162 001 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000085471

1. Entity Name
OLYMPIC GYM, INC.

Principal Place of Business
243 KEY DEER BLVD
BIG PINE SHOPPING PLAZA
BIG PINE KEY FL 33042

Mailing Address
243 KEY DEER BLVD
BIG PINE SHOPPING PLAZA
BIG PINE KEY FL 33042

2. Principal Place of Business
235 Key Deer Blvd.
 Suite, Apt. #, etc.
Big Pine Shopping Plaza
 City & State
Big Pine Key FL
 Zip
33043
 Country
USA

3. Mailing Address
235 Key Deer Blvd
 Suite, Apt. #, etc.
Big Pine Shopping Plaza
 City & State
Big Pine Key, FL
 Zip
33043
 Country
USA

4. FEI Number ☐ Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, ARTHUR L
243 KEY DEER BLVD
BIG PINE SHOPPING PLAZA
BIG PINE KEY FL 33042

7. Name and Address of New Registered Agent

Name **Smith, Arthur L**
 Street Address (P.O. Box Number is Not Acceptable)
2146 Palm Beach Rd
 City **Big Pine Key** FL Zip Code **33043**

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 **4/18/02**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SMITH, ARTHUR L 243 KEY DEER BLVD BIG PINE KEY FL 33042	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Smith, Arthur L 2146 Palm Beach Rd. Big Pine Key, FL 33043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/18/02 305-872-2001

CR2E034 (9/01)