2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State
03-20-2003 90102 041 ***150.00

DOCUMENT # P02000040867

1. Entity Name
INSIDE-OUT PILATES AND FITNESS ,INC

Principal Place of Business	Mailing Address
150 PINEVIEW RD	150 PINEVIEW RD
APT. F-3	APT. F-5
JUPITER, FL 33469	JUPITER, FL 33469

2. Principal Place of Business		3. Mailing Address	
1431 Cypress Dr.		1431 Cypress Dr.	
Suite, Apt. #, etc. #B		Suite, Apt. #, etc. #B	
City & State Jupiter, Fl.		City & State Jupiter, Fl	
Zip 33469	Country USA	Zip 33469	Country USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 03-0422968 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REEVES, KRISTEN	Name Kristen Reeves
150 PINEVIEW RD	Street Address (P.O. Box Number is Not Acceptable) 1431 Cypress Dr.
APT F-3	#B
JUPITER FL 33469	City Jupiter FL Zip Code 33469

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] 3/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P REEVES, KRISTEN 150M PINEVEIW RD APT F-3 JUPITER FL 33469	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	 1431 Cypress Dr. #B Jupiter, Fl. 33469	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	\	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Steven W. Sixberry 1431 Cypress Dr. #B Jupiter, Fl. 33469	☐ 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
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] SIGNATURE REQUIRED 3/15/03 561-741-7559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)