

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000069268

Entity Name: LIVING FIT, INC.

FILED
Jan 11, 2007
Secretary of State

Current Principal Place of Business:

99198 OVERSEAS HWY
SUITE #9
KEY LARGO, FL 33037

Current Mailing Address:

PMP #919
101425 OVERSEAS HWY
KEY LARGO, FL 33037

New Principal Place of Business:

99611 OVERSEAS HWY
#112
KEY LARGO, FL 33037

New Mailing Address:

99611 OVERSEAS HWY
112
KEY LARGO, FL 33037

FEI Number: 03-0473987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, CHRISTINA
PMP #919
101425 OVERSEAS HWY
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

ALLEN, CHRISTINA
123 SUNRISE DR.
TAVERNIER, FL 33070 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: CHRISTINA R. ALLEN

01/11/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: ALLEN, CHRISTINA
Address: 101425 OVERSEAS HWY PMP #919
City-St-Zip: KEY LARGO, FL 33037

Title: VPT (X) Delete
Name: HOLTZMAN, CYNTHIA
Address: 101425 OVERSEAS HWY PMP #919
City-St-Zip: KEY LARGO, FL 33037 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: ALLEN, CHRISTINA
Address: 123 SUNRISE DR.
City-St-Zip: TAVERNIER, FL 33070

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTINA R. ALLEN

PS

01/11/2007

Electronic Signature of Signing Officer or Director

Date