


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000086996		
1. Entity Name STRENGTH STUDIO, INC.		
Principal Place of Business 1240 SUNSET DRIVE WINTER PARK, FL 32789	Mailing Address 1240 SUNSET DRIVE WINTER PARK, FL 32789	
DO NOT WRITE IN THIS SPACE		



01032005 No Chg-P CR2E034 (10/03)

4. FEI Number 05-0525775	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MEAD, ROBERT W JR. 800 NORTH MAGNOLIA AVENUE SUITE 1201 ORLANDO, FL 32803		DO NOT WRITE IN THIS SPACE
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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinitiating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACMILLAN, MICHAEL 1240 SUNSET DRIVE WINTER PARK, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACMILLAN, CATHERINE 1240 SUNSET DRIVE WINTER PARK, FL 32789	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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03/18/05-80065-020 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Catherine MacMillan (CATHERINE MACMILLAN)

3/16/05 (407) 697-7755

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #