## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## May 05, 2005 08:00 AM Secretary of State **DOCUMENT # P02000107001** 1. Entity Name HOUSE OF FITNESS, INC. Principal Place of Business Mailing Address 231 ALTARA AVENUE 231 ALTARA AVENUE CORAL GABLES, FL 33146 CORAL GABLES, FL 33146 04222005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 51-0431180 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LANDA, ALEJANDRO DO NOT WRITE 231 ALTARA AVENUE CORAL GABLES, FL 33146 IN THIS SPACE 8. The above named entity submits this state then for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150,00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE NAME LANDA, ALEJANDRO STREET ADDRESS 6771 SW 48TH TERR. CITY-ST-ZIP MIAMI, FL 33155 TD TITLE U00000363429 BROCHE, IVONNE NAME 05/05/05-80158-017 150.00 STREET ADDRESS 6771 S E 48 TERR CITY-ST-ZIP MIAMI, FL 33155 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

79/05-305-669-116

**FILED**