

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2003 8:00 am
Secretary of State

01-28-2003 90081 002 ***150.00

DOCUMENT # P02000110061

1. Entity Name
CLUB FIT NO. 6, INC.



Principal Place of Business
9900 GRIFFIN RD.
COOPER CITY FL 33328
US

Mailing Address
9900 GRIFFIN RD.
COOPER CITY FL 33328
US



2. Principal Place of Business

400 N. Congress Ave

3. Mailing Address

Suite, Apt. #, etc.

4207

Suite, Apt. #, etc.

City & State
Brynthon Beach FL

City & State

4. FEI Number

82-0567620

Applied For

Not Applicable

Zip

33426

Country

Palm Beach

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 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

TITLE D ☒ Delete
NAME CLUB FIT HOLDINGS, LLC
STREET ADDRESS 9900 GRIFFIN RD.
CITY-ST-ZIP COOPER CITY FL 33328

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D P
STREET ADDRESS CAPATO ANTONIO
CITY-ST-ZIP 9900 GRIFFIN RD
COOPER CITY, FL 33328

TITLE ☐ Change ☒ Addition
NAME DU
STREET ADDRESS LEONARD, Phil
CITY-ST-ZIP 9900 GRIFFIN RD
COOPER CITY, FL 33328

TITLE ☐ Change ☒ Addition
NAME DST
STREET ADDRESS ROSENBLATT, Jon
CITY-ST-ZIP 110 W 25th ST 844
NY NY 10001

TITLE ☐ Change ☒ Addition
NAME DU
STREET ADDRESS GREENBERG, William
CITY-ST-ZIP 2929 Purchase ST
Purchase, NY 10577

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)