

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000122072

FILED
Apr 12, 2007
Secretary of State

Entity Name: CRISSCROSS FITNESS CORPORATION

Current Principal Place of Business:

6133 S.W. 25TH STREET
MIRAMAR, FL 33023 US

New Principal Place of Business:

99 N.W. 183RD STREET
126
MIAMI, FL 33169 US

Current Mailing Address:

6133 S.W. 25TH STREET
MIRAMAR, FL 33023 US

New Mailing Address:

99 N.W. 183RD STREET
126
MIAMI, FL 33169 US

FEI Number: 48-1285408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTRELLA-MARSH, SHEILA E
6133 S.W. 25TH STREET
MIRAMAR, FL 33023 US

Name and Address of New Registered Agent:

ALJOE, GARY S
99 N.W. 183RD STREET
126
MIAMI, FL 33169 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: GARY ALJOE

04/12/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESTRELLA-MARSH, SHEILA E
Address: 6133 S.W. 25TH STREET
City-St-Zip: MIRAMAR, FL 33023 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: ESTRELLA-MARSH, SHEILA E
Address: 242 RIVER HILLS DRIVE
City-St-Zip: CLAYTON, NC 27527 US

Title: VP/D () Change (X) Addition
Name: MARSH, ROGER A
Address: 242 RIVER HILLS DRIVE
City-St-Zip: CLAYTON, NC 27527 US

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: SHEILA ESTRELLA-MARSH

P/D

04/12/2007

Electronic Signature of Signing Officer or Director

Date