2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003661

Entity Name: ANE HEALTH & FITNESS, INC.

FILED Apr 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5055 ROTHCHILD DR 1808 SW 10TH AVENUE CORAL SPRINGS, FL 33067 FT LAUDERDALE, FL 33315

Current Mailing Address: New Mailing Address:

P.O. BOX 811477 BOCA RATON, FL 33481

FEI Number: 36-4518090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CONRADIC, ANE
5055 ROTHCHILD DR
607 CORAL SPRINGS, FL 33067 US
607 CONRADIE, ANE
1808 SW 10TH AVENUE
607 FT LAUDERDALE, FL 33315 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: ANE CONRADIE 04/30/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition Name: CONRADIE, ANE CONRADIE, ANE

Name:CONRADIE, ANEName:CONRADIE, ANEAddress:5055 ROTHCHILD DRAddress:1808 SW 10TH AVENUECity-St-Zip:CORAL SPRINGS, FL 33067City-St-Zip:FT LAUDERDALE, FL 33315

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: ANE CONRADIE DPST 04/30/2006