2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029528

FILED May 02, 2004 Secretary of State

Entity Name: FITNESS CLOSET TWO, INC. **Current Principal Place of Business: New Principal Place of Business:** 3519 GATLIN PLACE CIR. ORLANDO, FL 32812 **Current Mailing Address: New Mailing Address:** 3519 GATLIN PLACE CIR. ORLANDO, FL 32812 FEI Number: 41-2078746 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: WHITE, SHANNON 3519 GATLIN PLACE CIR. ORLANDO, FL 32812 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title:

Name:

Address:

(X) Change () Addition

SIMMONS, DAWN SIMMONS, DAWN Name: 2705 FALLING TREE CIR. 5729 ESTANCIA DRIVE #2234 Address:

City-St-Zip: ORLANDO, FL 32837 City-St-Zip: ORLANDO, FL 32822

Title: Title: () Change () Addition () Delete

Name: WHITE, SHANNON Name: 3519 GATLIN PLACE CIR. Address: Address: ORLANDO, FL 32812 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHANNON WHITE 05/02/2004 S