

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000035485

**FILED**  
**Jul 03, 2006**  
**Secretary of State**

**Entity Name:** DCL FITNESS & DEVELOPMENT, INC.

**Current Principal Place of Business:**

116 NW 51ST STREET  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

209 N ATLANTIC BLVD 3H  
FT. LAUDERDALE, FL 33304

**Current Mailing Address:**

116 NW 51ST STREET  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

209 N ATLANTIC BLVD 3H  
FT. LAUDERDALE, FL 33304

**FEI Number:** 45-0508032

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEVANDOWSKI, DUANE C  
116 NW 51ST STREET  
FT. LAUDERDALE, FL 33309 US

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

LEVANDOWSKI, DUANE C  
209 N ATLANTIC BLVD 3H  
FT. LAUDERDALE, FL 33304 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: \_\_\_\_\_

Electronic Signature of Registered Agent

07/03/2006

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: MR ( ) Delete  
Name: LEVANDOWSKI, DUANE  
Address: 116 NW 51ST STREET  
City-St-Zip: FT. LAUDERDALE, FL 33309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR (X) Change ( ) Addition  
Name: LEVANDOWSKI, DUANE  
Address: 209 N ATLANTIC BLVD 3H  
City-St-Zip: FT. LAUDERDALE, FL 33304

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: DUANE LEVANDOWSKI

Electronic Signature of Signing Officer or Director

MR.

07/03/2006

Date