


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000047340
1. Entity Name
PRECISION FITNESS EQUIPMENT OF ARIZONA, INC.



Principal Place of Business Mailing Address
5555 ANGLERS AVENUE **5555 ANGLERS AVENUE**
SUITE #23 **SUITE #23**
FORT LAUDERDALE, FL 33312 **FORT LAUDERDALE, FL 33312**



01032005 No Chg-P CR2E034 (10/03)

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4. FEI Number Applied For
04-3754953 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
WASSERLAUF, RICHARD
5555 ANGLERS AVENUE
SUITE #23
FORT LAUDERDALE, FL, FL 33312

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WASSERLAUF, RICHARD
STREET ADDRESS	5555 ANGLERS AVENUE, SUITE #23
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312
TITLE	VP
NAME	BERNIER, JEFF
STREET ADDRESS	5555 ANGLERS AVENUE, SUITE #23
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312
TITLE	VP
NAME	YAGODA, MARC
STREET ADDRESS	5555 ANGLERS AVENUE, SUITE #23
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Richard Wasserlauf, Pres* 1/22/05 (954) 962-9119
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #