

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**

2006 OCT -9 AM 10:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**DOCUMENT # P03000073540**  
 1. Entity Name  
 GLADIATOR FITNESS & NUTRITION, INC.

Principal Place of Business      Mailing Address  
 3418 S. HOPKINS AVENUE      3418 S. HOPKINS AVENUE  
 TITUSVILLE, FL 32780      TITUSVILLE, FL 32780

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



10052006    REIN-P    CR2E098 (11/05)

4. FEI Number      Applied For  
 27-0062706      Not Applicable

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

**6. Name and Address of Current Registered Agent      7. Name and Address of New Registered Agent**

BIEGLER, REGGIE J 3418 S. HOPKINS AVENUE TITUSVILLE, FL 32780	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City	FL      Zip Code

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

**FILE NOW!!! FEE IS \$150.00**  
**After January 1, 2007, Fee will be \$300.00**

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

**10. OFFICERS AND DIRECTORS      11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
D	BIEGLER, REGGIE J	3418 S. HOPKINS AVENUE	TITUSVILLE, FL 32780				
P	BIEGLER, REGGIE J	3418 S. HOPKINS AVENUE	TITUSVILLE, FL 32780				
S	BIEGLER, REGGIE J	3418 S. HOPKINS AVENUE	TITUSVILLE, FL 32780				
T	BIEGLER, REGGIE J	3418 S. HOPKINS AVENUE	TITUSVILLE, FL 32780				

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 10/09/06--01038--012 \*\*150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: REGGIE J BIEGLER      10/05/06 (321)385.9486  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Faxes #