

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90006 017 ***158.75

DOCUMENT # <u>P03000099 762</u>	
1. Entity Name <u>Next Level Fitness by Rebecca Inc.</u>	

DO NOT WRITE IN THIS SPACE

54066534

2. Principal Place of Business <u>Home Office</u> Suite, Apt. #, etc. <u>3314 Brenford Place</u>		3. Mailing Address <u>3314 Brenford Place</u> Suite, Apt. #, etc.	
City & State <u>Land O Lakes, FL</u>		City & State <u>Land O Lakes, FL</u>	
Zip <u>34639</u>	Country <u>USA</u>	Zip <u>34639</u>	Country <u>USA</u>

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4. FEI Number	Applied For ☒ No; Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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7. Name and Address of Current Registered Agent	
Name <u>Rebecca Ibbs</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>3314 Brenford Place</u>	
City <u>Land O Lakes</u>	FL Zip Code <u>34639</u>

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 <u>[Signature]</u> Signature, typed or printed name of registered agent and title if applicable	DATE <u>[Date]</u> (NOTE: Registered Agent signature is required when registering)
January 1 - May 1 Fee is \$150.00 After May 1 Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Rebecca Ibbs</u> <u>3314 Brenford Place</u> <u>Land O Lakes, FL 34639</u>	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 on an attachment with an address, with all other like empowered.	SIGNATURE: <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date <u>6/7/04</u>	Daytime Phone # <u>727-641-9881</u>
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CR2E034B (12/02)

Attachment

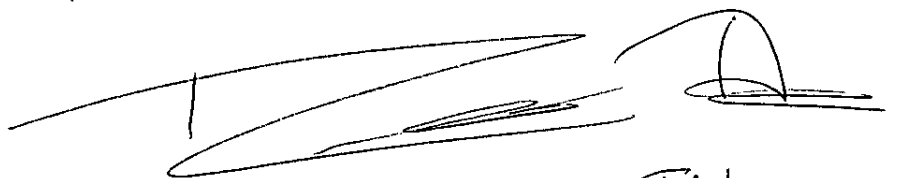
July 29, 04

To whom it may concern: 54066534
#P03000099762

I received this letter in the mail last week, on July 23rd. The letter is dated May 3rd and there was obviously a long delay until it got to me. I originally submitted my check in April and I apparently did not fill in the form completely. I have, to the best of my knowledge, now completed the form in it's entirety. I called ~~the~~ the Division of Corporations when I received this letter last Friday and ~~they~~ ^{ins} I was instructed to include a letter explaining the delay.

Your immediate attention is appreciated. If there are any further problems please contact me at my business number, 727-641-9881.

Thank you for your time



Rebecca Tibbs