

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000128723

FILED
Apr 15, 2004
Secretary of State

Entity Name: INNOVATIVE HEALTH AND FITNESS INC.

Current Principal Place of Business:

5255 NW 52 ST
COCONUT CREEK, FL 33073

New Principal Place of Business:

4959 N. UNIVERSITY DRIVE
LAUDERHILL, FL 33351

Current Mailing Address:

5255 NW 52 ST
COCONUT CREEK, FL 33073

New Mailing Address:

4959 N. UNIVERSITY DRIVE
LAUDERHILL, FL 33351

FEI Number: 56-2416533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAGASSE, SEAN SR
5255 NW 52 ST
COCONUT CREEK, FL 33073

Name and Address of New Registered Agent:

TORNATORE, WILLIAM JR
4959 N. UNIVERSITY DRIVE
LAUDERHILL, FL 33351

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: WILLIAM TORNATORE

04/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MENTIS, DEMITRIOS
Address: 1257 W ATLANTIC BLVD #203
City-St-Zip: POMPANO BCH, FL 33069

Title: VD () Delete
Name: LAGASSE, SEAN SR
Address: 1257 W ATLANTIC BLVD #203
City-St-Zip: POMPANO BCH, FL 33069

Title: TSD () Delete
Name: TORNATORE, WILLIAM
Address: 4959 N UNIVERSITY DR #19
City-St-Zip: LAUDERHILL, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: LAGASSE, SEAN SR
Address: 1257 W ATLANTIC BLVD #203
City-St-Zip: POMPANO BCH, FL 33069

Title: CFO (X) Change () Addition
Name: TORNATORE, WILLIAM
Address: 4959 N UNIVERSITY DR #19
City-St-Zip: LAUDERHILL, FL 33351

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: WILLIAM TORNATORE

CFO

04/15/2004

Electronic Signature of Signing Officer or Director

Date