

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000154851

FILED
Mar 12, 2004
Secretary of State

Entity Name: PRESCRIPTION FITNESS, INC.

Current Principal Place of Business:

180 YACHT CLUB WAY, #205
HYPOHUXO, FL 33462

New Principal Place of Business:

180 YACHT CLUB WAY, #205
HYPOLUXO, FL 33462

Current Mailing Address:

180 YACHT CLUB WAY, #205
HYPOHUXO, FL 33462

New Mailing Address:

180 YACHT CLUB WAY, #205
HYPOLUXO, FL 33462

FEI Number: 20-0518859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEENEY, RONALD
180 YACHT CLUB WAY, #205
HYPOHUXO, FL 33462

Name and Address of New Registered Agent:

JOHNSON, JACOB
180 YACHT CLUB WAY, #205
HYPOLUXO, FL 33462

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: JACOB JOHNSON

03/12/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEENEY, RONALD
Address: 180 YACHT CLUB WAY, #205
City-St-Zip: HYPOHUXO, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, JACOB
Address: 180 YACHT CLUB WAY, #205
City-St-Zip: HYPOLUXO, FL 33462

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: JACOB JOHNSON

D

03/12/2004

Electronic Signature of Signing Officer or Director

Date