

## **2007 FOR PROFIT CORPORATION**

## Apr 16, 2007 8:00 am Secretary of State **ANNUAL REPORT** 04-16-2007 90081 028 \*\*\*150.00 DOCUMENT # P04000007003 TAKE CONTROL FITNESS, INC. 40065819 Principal Place of Business Mailing Address 8125 BRINEGAR CIR. 8125 BRINEGAR CIR. TAMPA, FL 33647 TAMPA, FL 33647 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02282007 CR2E034 (12/06) Applied For City & State City & State 4. FEI Number 55-0856633 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TELEMAQUE-REUTEN, BEVERLEY Street Address (P.O. Box Number is Not Acceptable) 8125 BRINEGAR CIR. TAMPA, FL 33647 City 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of regis agent and little if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE PSD ☐ Delete TITLE ☐ Change ☐ Addition TELEMAQUE-REUTEN, BEVERLEY NAME NAME 8125 BRINEGAR CIR. STREET ADDRESS STREET ADDRESS TAMPA, FL 33647 CITY-ST-7IP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CHY-SI-7P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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 a haddress, with all other like empowered.

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## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Principal Place of Business 8125 BRINEGAR CIR. TAMPA, FL 33647			Mailing Address 8125 BRINEGAR CIR. TAMPA, FL 33647			ATTACHMENT				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address			40062873				
Suite, Apt. #, etc.			Suite, Apt. #, etc.			02282007	Chg-P	CR2E	034 (12/06)	
City & State			City & State		4. FEI Numbe 55-085			·	plied For t Applicable	
Zìp	п	Country			ntry		of Status Desired		\$8.75 Add Fee Required	
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
TELEMAQUE-REUTEN, BEVERLEY 8125 BRINEGAR CIR. TAMPA, FL 33647					Name Street Address (f	P.O. Box Numbe	er is Not Acceptable	e)		
					City			FL	Zip Code	э
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	Signature, typed	d or printed name of registered adent	and title if applicable. (NOT	E: Registere	ad Agent signature required	when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.   9. Election Campaign Financing Added to Fees										
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS ANI	DIRECTORS	3 IN 11
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #										