

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000128417

FILED  
Feb 06, 2005  
Secretary of State

**Entity Name:** LADIES WORKOUT EXPRESS OF HOLLY HILLS INC

**Current Principal Place of Business:**

1516 NORTH DAYTONA AVENUE  
FLAGLER BEACH, FL 32136 US

**New Principal Place of Business:**

**Current Mailing Address:**

1516 NORTH DAYTONA AVENUE  
FLAGLER BEACH, FL 32136 US

**New Mailing Address:**

PO BOX 1558  
FLAGLER BEACH, FL 32136 US

**FEI Number:** 20-1601605

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEGAL ZOOM NEVADA, INC.  
44 W. FLAGLER ST.  
SUITE 675  
MIAMI, FL 33130 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: MINICOZZI, MAUREEN  
Address: 1516 NORTH DAYTONA AVENUE  
City-St-Zip: FLAGLER BEACH, FL 32136 US

Title: SECR ( ) Delete  
Name: MINICOZZI, WILLIAM  
Address: 1516 NORTH DAYTONA AVENUE  
City-St-Zip: FLAGLER BEACH, FL 32136 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 MINICOZZI

SECR

02/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date