2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008
Secretary of State

DOCUMENT# P04000167331

Entity Name: SMPM FITNESS, INC.

Current Principal Place of Business:

5665 PARK STREET N
SAINT PETERSBURG, FL 33709

New Principal Place of Business:

5665 PARK STREET NORTH
SAINT PETERSBURG, FL 33709

Current Mailing Address:

5665 PARK STREET N
SAINT PETERSBURG, FL 33709

New Mailing Address:

1621 GULF BLVD.
1008
CLEARWATER, FL 33767

FEI Number: 25-1905288 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIKULIZA, SHARON P
1621 GULF BLVD., #1008
CLEARWATER, FL 33767 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: D ( ) Delete
Name: MIKULIZA, SHARON P
Address: 1621 GULF BLVD., #1008
City-St-Zip: CLEARWATER, FL 33767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SHARON P. MIKULIZA D 04/21/2008
Electronic Signature of Signing Officer or Director Date