2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Secretary of State DOCUMENT # P05000003591 03-09-2006 90152 002 ***150.00 BERTKE FITNESS, INC. Mailing Address Principal Place of Business 1629 S.E. THIRD COURT 1629 S.E. THIRD COURT DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042006 Chg-P CR2E034 (11/05) 4. FEI Number City & State Applied For City & State 11-3740263 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BERTKE, NICOLE 3225 TURTLE GOVE WEST PALM BEACH, FL 33411 Deerfiell Beach, FL Street Address (P.O. Box Number is Not Acceptable) City Zip Code 6. 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 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE NAME BERTKE NICOLE NAME SE 10th Revia ce 3225 TURTLE COVE STREET ADORESS STREET ADDRESS eld Beach, FL 3344/ CITY-ST-ZIP WEST PALM BEACH, FL-93411 CITY-ST-ZIP VP TITLE ☐ Delete TITLE ELLERIN, CHARLES NAME NAME STREET ADDRESS 3075 HAMPTON PLACE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33434 CITY-ST-ZIP VΡ TITLE ☐ Delete TITLE SE 10th Perrace BERTKE, BRIAN NAME NAME 3225 TURTLE COVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL-93411 CITY-ST-ZIP TITLE ☐ Delete TITLE **ELLERIN, CHARLES** NAME 3075 HAMPTON PLACE STREET ADDRESS STREET ADDRESS J BOCA RATON, FL 33434 CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition ELLERIN, SHIRLEY NAME NAME 3075 HAMPTON PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33434 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

GNING OFFICER OR DIRECTOR

FILED Mar 09, 2006 8:00 am