## 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000004288

Entity Name: XPRESS FITNESS CLUBS, INC.

FILED Sep 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

250 S. OCEAN BLVD MANALAPAN, FL 33462

Current Mailing Address: New Mailing Address:

P.O. BOX 211962 250 S. OCEAN BLVD ROYAL PALM BEACH, FL 33421 MANALAPAN, FL 33462

FEI Number: 20-2132165 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

KERN, KEITH D ESQ MONESCALCHI, RICHARD J ESQ 50 SE FOURTH AVENUE 1035 S. STATE ROAD 7 DELRAY BEACH, FL 33483 US WELLINGTON, FL 33414 US

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: RICHARD MONESCALCHI 09/06/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 GARRAMONE, GARY
 Name:
 PURCELL, ERIC

 Address:
 2027 RESTON CIRCLE
 Address:
 2165 IBIS ISLE ROAD

 City-St-Zip:
 ROYAL PALM BEACH, FL 33411
 City-St-Zip:
 PALM BEACH, FL 33480

Title: S () Delete Title: S (X) Change () Addition

Name: GARRAMONE, GARY Name: MACKLER, GARY

Address: 2027 RESTON CIRCLE Address: 162 HARBOR LAKES CIRCLE City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: GREENACRES, FL 33413

 Name:
 GARRAMONE, GARY
 Name:
 MACKLER, GARY

 Address:
 2027 RESTON CIRCLE
 Address:
 162 HARBOR LAKES CIRCLE

City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: GREENACRES, FL 33413

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: GARRAMONE, GARY Name: MACKLER, GARY

Address: 2027 RESTON CIRCLE Address: 162 HARBOR LAKES CIRCLE City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: GREENACRES, FL 33413

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIC PURCELL P 09/06/2006