

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036155

FILED
Mar 29, 2008
Secretary of State

Entity Name: BEACHES PILATES- FITNESS AND REHABILITATION, INC.

Current Principal Place of Business:

523 4TH STREET NORTH
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

2220 CR 210 WEST
SUITE 108. PMB # 157
ST. JOHNS, FL 32259 US

Current Mailing Address:

523 4TH STREET NORTH
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

2220 CR 210 WEST
SUITE 108. PMB # 157
ST. JOHNS, FL 32259 US

FEI Number: 20-2460084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYONS, CYNTHIA
523 4TH STREET NORTH
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

LYONS, CYNTHIA
2220 CR 210 WEST
SUITE 108. PMB # 157
ST. JOHNS, FL 32259 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: CYNTHIA LYONS

03/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LYONS, CYNTHIA
Address: 523 4TH STREET NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: TREA () Delete
Name: LYONS, CYNTHIA
Address: 523 4TH STREET NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LYONS, CYNTHIA
Address: 2220 CR 210 WEST SUITE 108. PMB # 157
City-St-Zip: ST. JOHNS, FL 32259 US

Title: TREA (X) Change () Addition
Name: LYONS, CYNTHIA
Address: 2220 CR 210 WEST SUITE 108. PMB # 157
City-St-Zip: ST. JOHNS, FL 32259 US

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: CYNTHIA LYONS

P

03/29/2008

Electronic Signature of Signing Officer or Director

Date