

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000088344

FILED  
Apr 28, 2007  
Secretary of State

Entity Name: ATHLETES' OPTIMAL PERFORMANCE, INC.

## Current Principal Place of Business:

7370 SW. 82ND ST. APT E-118  
MIAMI, FL 33143 US

## New Principal Place of Business:

7370 SW 82ND ST  
APT E-118  
MIAMI, FL 33143 US

## Current Mailing Address:

7370 SW. 82ND ST. APT E-118  
MIAMI, FL 33143 US

## New Mailing Address:

7370 SW 82ND ST  
APT E-118  
MIAMI, FL 33143 US

FEI Number: 20-3029999

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONSECA, MANUEL  
7370 SW. 82ND ST. APT E-118  
MIAMI, FL 33143 US

## Name and Address of New Registered Agent:

FONSECA, MANUEL  
7370 SW 82ND ST  
APT E-118  
MIAMI, FL 33143 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:

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FONSECA, MANUEL  
Address: 7370 SW. 82 ST. # E-118  
City-St-Zip: MIAMI, FL 33143

Title: VPD ( ) Delete  
Name: LOPEZ, ALEJANDRO  
Address: 4000 CHIPOLA STREET  
City-St-Zip: TALLAHASSEE, FL 32303

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FONSECA, MANUEL  
Address: 7370 SW 82 ST, APT E-118  
City-St-Zip: MIAMI, FL 33143

Title: VPD (X) Change ( ) Addition  
Name: LOPEZ, ALEJANDRO  
Address: 4000 CHIPOLA ST  
City-St-Zip: TALLAHASSEE, FL 32303

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: MANUEL FONSECA

PD

04/28/2007

Electronic Signature of Signing Officer or Director

Date