



# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2008 8:00 am**  
**Secretary of State**

02-13-2008 90028 041 \*\*\*150.00

<b>DOCUMENT # P05000088824</b> 1. Entity Name <b>POSTURE AND PERFORMANCE, INC.</b>					
Principal Place of Business <b>3221 NW 10 TERR SUITE 507 FORT LAUDERDALE, FL 33309</b>			Mailing Address <b>3221 NW 10 TERR SUITE 507 FORT LAUDERDALE, FL 33309</b>		
2. Principal Place of Business - No P.O. Box # <b>2401 PGA BLVD</b>		3. Mailing Address <b>2401 PGA BLVD</b>			
Suite, Apt. #, etc. <b># 134</b>		Suite, Apt. #, etc. <b># 134</b>			
City & State <b>Palm Beach Gardens, FL</b>		City & State <b>Palm Beach Gardens, FL</b>		02082008    Chg-P    CR2E034 (12/06)	
Zip <b>33410</b>		Country <b>USA</b>		4. FEI Number <b>20-3046748</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		Applied For <input type="checkbox"/> Not Applicable			
6. Name and Address of Current Registered Agent  <b>BOTSFORD &amp; WHITE, LLC 3595 SHERIDAN STREET SUITE 208 HOLLYWOOD, FL 33021</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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 _____ (NOTE: Registered Agent signature required when reinstating)    DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TAKER, R. SHAWN</b> <b>690 S.E. 15TH STREET #304</b> <b>DANIA BEACH, FL 33004</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TAKER, R. SHAWN</b> <b>12052 Highway A-1A Alternate #C4</b> <b>Palm Beach Gardens, FL 33410</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date: <b>2/11/08</b> Daytime Phone #		