

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098268

FILED  
Mar 31, 2006  
Secretary of State

Entity Name: MACHFIT, INC.

## Current Principal Place of Business:

642 STURBRIDGE TERR SE  
PALM BAY, FL 32909

## New Principal Place of Business:

## Current Mailing Address:

642 STURBRIDGE TERR SE  
PALM BAY, FL 32909

## New Mailing Address:

FEI Number: 20-3220938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TSAMOUTALES, NICHOLAS F  
1900 PALM BAY RD NE  
SUITE G  
PALM BAY, FL 32905 US

## Name and Address of New Registered Agent:

TAYLOR, SUSAN  
3150 N WICKHAM RD  
STE 3  
MELBOURNE, FL 32935 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: SUSAN TAYLOR

03/31/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: JERVIS, AMANDA G  
Address: 642 STURBRIDGE TERR SE  
City-St-Zip: PALM BAY, FL 32909

Title: DT ( ) Delete  
Name: JERVIS, CHRISTIAN C  
Address: 642 STURBRIDGE TERR SE  
City-St-Zip: PALM BAY, FL 32909

Title: S ( ) Delete  
Name: HARRELL, KATHLEEN E  
Address: 642 STURBRIDGE TERR SE  
City-St-Zip: PALM BAY, FL 32909

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: AMANDA JERVIS

DP

03/31/2006

Electronic Signature of Signing Officer or Director

Date