

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000000344

Entity Name: SHERIEFITNESS, INC.

FILED
Jun 03, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 266801
WESTON, FL 33326

New Principal Place of Business:

4950 SW 135 AVENUE
MIRAMAR, FL 33027

Current Mailing Address:

P.O. BOX 266801
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-4683965

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVADORI, SHERIE
4950 SW 135 AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVS () Delete
Name: SALVADORI, SHERIE
Address: P.O. BOX 266801
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SHERIE B SALVADORI

PVS

06/03/2007

Electronic Signature of Signing Officer or Director

Date