

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113795

Entity Name: THE PILATES ROOM CO.

FILED
Mar 26, 2009
Secretary of State

Current Principal Place of Business:

2175 NE 163RD STREET
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

2175 NE 163RD STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 20-5529164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARMONA, LIZA
8958 CARLYLE AVE
SURFSIDE, FL 33154 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAVIRE, MICHELE
Address: 100 SCOTIA DR. #408
City-St-Zip: LANTANA, FL 33462

Title: D () Delete
Name: CARMONA, LIZA
Address: 8958 CARLYLE AVE
City-St-Zip: SURFSIDE, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LIZA CARMONA

MRS.

03/26/2009

Electronic Signature of Signing Officer or Director

Date