

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000004509

**FILED**  
**Sep 07, 2012**  
**Secretary of State**

**Entity Name:** FAMILY FIT INC.

**Current Principal Place of Business:**

6987 OAK BRIDGE LANE  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

6987 OAK BRIDGE LANE  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

**FEI Number:** 11-3803096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BERKOWITZ, MELISSA  
6987 OAK BRIDGE LANE  
LAKE WORTH, FL 33467 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:** MELISSA A BERKOWITZ

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BERKOWITZ, MELISSA  
**Address:** 6987 OAK BRIDGE LANE  
**City-St-Zip:** LAKE WORTH, FL 33467 US

I hereby 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 all other like empowered.

**SIGNATURE:** MELISSA A BERKOWITZ

PRES

09/07/2012

Electronic Signature of Signing Officer or Director

Date