

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000008428

Entity Name: ONETOUCH FITNESS, INC.

FILED
Jan 21, 2008
Secretary of State

Current Principal Place of Business:

202 TOWER DRIVE
UNIT B
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

5730 HOOVER BLVD
TAMPA, FL 33634

New Mailing Address:

4902 W. SLIGH AVE
TAMPA, FL 33634

FEI Number: 20-8254080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAKILI, HOOMAN
5730 HOOVER BLVD
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

VAKILI, HOOMAN
4902 W. SLUGH AVE
TAMPA, FL 33634 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: HOOMAN VAKILI

01/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BENSON, RON
Address: 5730 HOOVER BLVD
City-St-Zip: TAMPA, FL 33634

Title: VP () Delete
Name: MOLE, JOSEPH
Address: 5730 HOOVER BLVD
City-St-Zip: TAMPA, FL 33634

Title: VP () Delete
Name: REED, CHRISTOPHER
Address: 5730 HOOVER BLVD
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BENSON, RON
Address: 4902 W. SLIGH AVE
City-St-Zip: TAMPA, FL 33634

Title: VP (X) Change () Addition
Name: MOLE, JOSEPH
Address: 4902 W. SLIGH AVE
City-St-Zip: TAMPA, FL 33634

Title: VP (X) Change () Addition
Name: REED, CHRISTOPHER
Address: 4902 W. SLIGH AVE
City-St-Zip: TAMPA, FL 33634

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: RON BENSON

P

01/21/2008

Electronic Signature of Signing Officer or Director

Date