

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000011007

FILED
Feb 22, 2009
Secretary of State

Entity Name: HOME FITNESS TRAINERS INC

Current Principal Place of Business:

277 ROYAL POINCIANA WAY
SUITE 144
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

277 ROYAL POINCIANA WAY
SUITE 144
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 20-8323697

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTEN, LOUIS
5321 LAKE WORTH RD
LAKE WORTH, FL 33463 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: LOUIS PATTEN

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: P () Delete
Name: SALERNO, VERONICA
Address: 277 ROYAL POINCIANA WAY STE 144
City-St-Zip: PALM BEACH, FL 33480

Title: V () Delete
Name: SALERNO, VERONICA
Address: 277 ROYAL POINCIANA WAY STE 144
City-St-Zip: PALM BEACH, FL 33480

Title: S () Delete
Name: SALERNO, VERONICA
Address: 277 ROYAL POINCIANA WAY STE 144
City-St-Zip: PALM BEACH, FL 33480

Title: T () Delete
Name: SALERNO, VERONICA
Address: 277 ROYAL POINCIANA WAY STE 144
City-St-Zip: PALM BEACH, FL 33480

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:

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: VERONICA SALERNO

O/D

02/22/2009

Electronic Signature of Signing Officer or Director

Date