

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000109507

FILED
Nov 02, 2009
Secretary of State

Entity Name: CARDIO XTREME BOOT CAMP FOR WOMEN, INC.

Current Principal Place of Business:

10081 PINE BOULEVARD, SUITE C
PEMBROKE PINES, FL 33024

New Principal Place of Business:

10795 RICHMOND PLACE
COOPER CITY, FL 33026

Current Mailing Address:

10081 PINE BOULEVARD, SUITE C
PEMBROKE PINES, FL 33024

New Mailing Address:

10795 RICHMOND PLACE
COOPER CITY, FL 33026

FEI Number: 61-1541151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRAUS, ARNOLD M ESQ
10081 PINE BOULEVARD, SUITE C
PEMBROKE PINES, FL 33024 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: ARNOLD STRAUS

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: DPS () Delete
Name: STEWART, SHARON
Address: 10795 RICHMOND PLACE
City-St-Zip: COOPER CITY, FL 33026

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: SHARON STEWART

DPS

11/02/2009

Electronic Signature of Signing Officer or Director

Date