

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P93000023815**

1. Filing Name

EZ FIT, INC.

FILED

May 30, 2000 8:00 am
Secretary of State

05-30-2000 90103 033 ***150.00

Principal Place of Business Mailing Address
333 NE 28th St **333 NE 28th St**
Boca Raton, FL 33431 **Boca Raton FL**
33431

Principal Place of Business 333 NE 28th St Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State Boca Raton, FL		City & State	
Zip 33431	Country USA	Zip	Country

4. FEI Number 65-0399534	Applied For ☐
5. Certificate of Status Desired ☐	Not Applied

DO NOT WRITE IN THIS SPACE

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ELDA S. ZANIN
333 NE 28th St
Boca Raton, FL 33431

7. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
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9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$350.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PRESIDENT ☐ Delete	NAME ELDA S. ZANIN	TITLE	☐ Change ☐ Add
STREET ADDRESS 333 NE 28th St	CITY-STATE-ZIP Boca Raton, FL 33431	NAME	
STREET ADDRESS	CITY-STATE-ZIP	STREET ADDRESS	
STREET ADDRESS	CITY-STATE-ZIP	CITY-STATE-ZIP	
STREET ADDRESS	CITY-STATE-ZIP	STREET ADDRESS	
STREET ADDRESS	CITY-STATE-ZIP	CITY-STATE-ZIP	
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STREET ADDRESS	CITY-STATE-ZIP	STREET ADDRESS	
STREET ADDRESS	CITY-STATE-ZIP	CITY-STATE-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(1)(a), Florida Statutes. I further certify that the information indicated in this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12, changed, or on an attachment with an address, with all other like empowered

Elda S. Zanin

5-10-00