FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000011486 (5)

HART PERSONAL TRAINING, INC.

Country

Principal Place of Business 10261 SUGAR CREEK DR PENSACOLA FL 32514

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

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23 Zip

24

Mailing Address

2a. Mailing Address

City & State

Zigi

Suito, Apt #, etc.

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10261 SUGAR CREEK DR PENSACOLA FL 32514

FILED Feb 18 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Yes Yes

Not Applicable

 Date Incorporated or Qualified 02/07/1994

59-3220218

5. Certificate of Status Desired

Trust Fund Contribution

Election Campaign Financing

Personal Property Tax due June 30.

FEI Number

g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
HART, RICHARD 10261 SUGAR CREEK DR PENSACOLA FL 32514			81		ame	,				
			82	82 Street Address (P.O. Box Number is Not Acceptable)						
			63			<u>-</u>				
			84	Cit	ty	FL	85	Zip (Code	
				<u> </u>						
office or re		orida. Such change was auf	horized by	the!	med corporation submits this statement for the p corporation's board of directors. I hereby accep					
SIGNATURE	Signature typed or printed harve of highsteneo agent at o	title diapple vible (NOTE R	legistered Age	nt sia	nature required when reinstalling)	DATE				
12.	OFFICERS AND DII		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRE	CTOR	S IN 12	
TITLE	D	DELETE	1.1 TITLE				☐ Ch		Addition	
NAME	HART, RICHARD		1.2 NAME							
STREET ADDRESS	10261 SUGAR CREEK DR		1.3 STREET	ADDR	RESS					
CITY-ST-ZIP	PENSACOLA FL 32514		1.4 CITY-S	T-ZIP						
TITLE	D	DELETE	2.1 TITLE			,	Ch	ange	Addition	
NAME	Hart, Darby		22 NAME		· ·				[
STREET ADDRESS	10261 SUGAR CREEK DR		2.3 STREET	ADDR	IESS					
CITY-ST-ZIP	PENSACOLA FL 32514		2 4 CITY-5	ST - ZIP	s					
TITLE		DELETE	3.1 TITLE				Ch	inge	Addition	
NAME			3.2 NAME							
STREET ADORESS			33 STREFT	ADDR	ESS					
CITY-ST-ZIP			3.4, DITY - S	ST-ZIP						
TITLE		☐ DELFTE	4.1 TITLE				Ch	inge	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET	ADDR	ESS					
CITY - ST - ZIP			44 CITY-S	T-ZIP						
TITLE		☐ DELETE	5 1 TITLE				Ch	ange	Addition	
NAME			52 NAME							
STREET ADDRESS			5.3 STREET	ADDR.	ESS					
CITY-ST-ZIP		····	5.4 CITY - S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE				∐ ¢h	ange	Addition	
NAME			6.2 NAME							
STREET ADDRESS			63 STREET	ADDRI	ESS					
CITY-ST-ZIP	of all all all all all all all all all al		6.4 CITY-S				200 2			
indicated of officer or of	ertry that the information supplied with in on this annual report or suppliement pair director of the corporation of the recoloci- or Block 13 if changed or on an ethiching	nual report is true and accura or trustee empowered to exa	rie exemple ate and ha ecute his r	at my repo	stated in Section 119.07(3)(i), Florida Statutes. I y signature shall have the same legal effect as if rt as required by Chapter 607, Florida Statutes;	made un and that r	der oal ny nam	at the h; tha le app	iniormation t I am an pears in	

Country

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