

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90107 048 ***150.00

DOCUMENT # P94000044258
1. Entity Name
PHOENIX GYM

421702

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
PHOENIX GYM INC.
Suite, Apt. #, etc.
314-316 SEABREEZ BLDG
City & State
DAYTONA BEACH FL.

3. Mailing Address
SAME
Suite, Apt. #, etc.
SAME
City & State
SAME

Zip
32118 Country

4. FEI Number
59-3251701 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name CLARA G. HOULLIS
Street Address (P.O. Box Number is Not Acceptable)
808 RIVERSIDE DR.
City HOLLY HILL, FL FL Zip Code 32117

8. 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: Clara G. Houllis Clara G. Houllis 3-18-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>D EMANUEL J. SOTIRIN 84 HILLODALE AVE. ORMOND BEACH, FL 32176</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP <u>D CLARA G. HOULLIS 808 RIVERSIDE DRIVE HOLLY HILL FL. 32117</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Emmanuel Sotirin EMANUEL J. SOTIRIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT 3-18-02 386-258-9333
Date Daytime Phone #

CR2E034B (12/01)