


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000080713	
1. Entity Name DJ'S FITNESS STATIONS, INC.	
	
Principal Place of Business 18804 S DIXIE HWY MIAMI, FL 33157	Mailing Address 3 GROVE ISLE DRIVE 505 COCONUT GROVE, FL 33133



04132005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0549219	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**FEINSWOG, SCOTT L
3 GROVE ISLE DRIVE #505
COCONUT GROVE, FL 33133**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP FEINSWOG, SCOTT L 3 GROVE ISLE DRIVE #505 COCONUT GROVE, FL 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DSVP FEINSWOG, MALVINA 3 GROVE ISLE DRIVE #505 COCONUT GROVE, FL 33133
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05/02/05-80108-022 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT L. FEINSWOG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/05 305-251-2499
Date Daytime Phone #

SCOTT L. FEINSWOG, PRES.