FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

ACCEPTED AND FILED
96 AUG 12 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000071292

1. Corporation Name: ADVANTAGE MASSAGE ASSOC. INC.

Principal Place of Business: 901 Douglas AVE #200 Alt. Spg. Fl. 32714

Mailing Address: 901 Douglas AVE #200 Alt. Spg. Fl. 32714

3. Date Incorporated or Qualified: 1-01-95

3a. Date of Last Report: N/A

2. Principal Place of Business
21: SAME
Suite, Apt. #, etc.
22: STE# 200
City & State
23: Alt. Spg. Fl.
Zip 24: 32714 Country 25: US.

2a. Mailing Address
26: SAME
Suite, Apt. #, etc.
27: #200
City & State
28: SAME
Zip 29: SAME Country 30: US

4. FEI Number: 59-3293771 — Applied For / Not Applicable

5. Certificate of Status Desired: X — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

Jeffery E. THETFORD
901 Douglas AVE #200
Alt. Spg. Fl. 32714

10. Name and Address of New Registered Agent

81 Name: Martin J. ROSANOVA
82 Street Address (P.O. Box Number is Not Acceptable): 901 Douglas AVE #200
83
84 City: Alt. Spg. FL 85 Zip Code: 32714

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Martin J. Rosanova DATE: 8-12-96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT Jeffery E. THETFORD 901 Douglas AVE #200 Alt. Spg. Fl. 32714	☐ DELETE X	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	ACTING President/Director Martin J. ROSANOVA 901 Douglas AVE Alt. Spg. Fl. 32714 — ☐ Change ☐ Addition X
		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Martin J. Rosanova — 8-12-96 (407) 895-6530
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER