

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 OCT 23 PM 3: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000068659 (8)

1. Corporation Name
GENERAL FITNESS, INC.

Principal Place of Business
6950 BRYAN DERRY ROAD
LARGO FL 34647

Mailing Address
6950 BRYAN DERRY ROAD
LARGO FL 34647

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
09/06/1995

3a. Date of Last Report
06/10/1996

4. FEI Number
59-3346771

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

ERIK CHRISTENSON
6950 BRYAN DAIRY RD.
SUITE 125
LARGO FL 33311

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Accepted)
6950 BRYAN DAIRY RD. SUITE 125

83 City State Zip
LARGO FL 33311

84 City

85 Zip Code

11. Pursuant to the provisions of Sections 607.0309 and 607.0308, 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D DELETED

NAME SANTOSTOSI, PAUL
STREET ADDRESS 6950 BRYAN DERRY ROAD
CITY-STATE-ZIP LARGO FL 34647

TITLE PTD DELETED

NAME MARVIN DEUTSCH
STREET ADDRESS 6950 BRYAN DAIRY RD.
CITY-STATE-ZIP LARGO FL

TITLE VS DELETED

NAME ERIK CHRISTENSON
STREET ADDRESS 6950 BRYAN DAIRY RD.
CITY-STATE-ZIP LARGO FL

TITLE D DELETED

NAME CHRISTOPHER STARKEY
STREET ADDRESS 900 SOUTH U.S. #1., SUITE 108
CITY-STATE-ZIP JUPITER FL

TITLE DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE DELETED

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

Change Addition

Change Addition

Change Addition

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14. I do 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 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

SIGNATURE REQUIRED

9/22/97 913-
544-8866

CR2E034 (4/97)