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Feb 03 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P95000073370 (5)

1. Corporation Name  
TOTAL FITNIS ENTERPRISES, INC.



Principal Place of Business  
8406 BLACKSTONE COURT  
TAMPA FL 33615

Mailing Address  
8406 BLACKSTONE COURT  
TAMPA FL 33615-4811

3. Date Incorporated or Qualified  
09/21/1995

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business  
21 8421 BAY BLVD DR  
Suite, Apt. #, etc.

2a. Mailing Address  
26 8421 BAY BLVD DR  
Suite, Apt. #, etc.

4. FEI Number  
59-3334595  
Applied For  
Not Applicable

22  
City & State  
23 TAMPA, FLORIDA

27  
City & State  
28 TAMPA, FLORIDA

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

24 Zip 33615 Country USA

29 Zip 33615 Country USA

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

10. Name and Address of New Registered Agent

NISBERG, ALAN  
6200 COURTNEY CAMPBELL CAUSEWAY  
SUITE 1100  
TAMPA FL 33607

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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

Signature: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD  
NAME NISBERG, ALAN J  
STREET ADDRESS 8406 BLACKSTONE COURT  
CITY-ST-ZIP TAMPA FL 33615

1.1 TITLE PSTD  
1.2 NAME NISBERG, ALAN J  
1.3 STREET ADDRESS 8421 BAY BLVD DR  
1.4 CITY-ST-ZIP TAMPA, FLORIDA 33615  
Change ☒ Addition ☐

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN J. NISBERG

1/22/97

(813) 887 5614

CR2E034 (9/96)