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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000070920 (9)

"R" GYM, INC.

Principal Place of Business

NAME

STREET ADDRESS

appears in Block 12 or Block 13 if change

CHY-ST-ZIP

12161 SOUTHWEST 3RD STREET 12161 SOUTHWEST 3RD STREET PLANTATION FL 33325 PLANTATION FL 33325-2807 3. Date Incorporated or Qualified 3a. Date of Last Report 08/26/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 Not Applicable Suite Apt. # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Florida Statutes Yes No 24 29 25 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name CORPORATION SERVICE COMPANY 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signer wai typical or printed name of registered agent and title if applicable (NOTE: Flegistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE Change THE 1.1 TITLE PARENTE, ESTERINA M NAME 1.2 NAME 12161 SOUTHWEST 3RD STREET 1.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL 33325** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change ■ Addition THLE 2.1 TITLE PARENTE, JOSEPHINE NAME 2.2 NAME 12161 SOUTHWEST 3RD STREET 2.3 STREET ADDRESS STREET ADDRESS **PLANTATION FL 33325** 2 4 CITY-ST-ZIP CITY - \$1 - 7# Change DELETE ■ Addition 31 TITLE HILE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CHY-ST-Z-F Addition DELETE Change Tille 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY: ST-ZIP 4.4 CITY - \$T - ZIP DELETE Change Addition 5.1 TITLE HILF 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - 7IP DELETE Change Addition TIFLE 6.1 TITLE

> 6.2 NAME 6.3 STREET ADDRESS

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

6.4 CITY-ST-ZIP

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