## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000084767 (8)

ADVANCED FITNESS TECHNOLOGIES, INC.

Principal Place of Business Mailing Address					-					
106 PALOMINO DRIVE 106 PALOMINO DRIVE JUPITER FL 33458 JUPITER FL 33458-8009										
						Ì	Date Incorporated or Qualified 10/11/1996	<b>3a.</b> Da	te of Last	Report
2. Principal f	Place of Business	2a. Mailing Address 26				4.	FEI Number 65-070063 kg	>	<del></del>	Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.				5.	Certificate of Status Desired		<b>*</b> * * * * *	Additional Required
City & Sta		City & State			****		Election Campaign Financing Trust Fund Contribution	ם	Added	O May Be d to Fees
Zip <b>24</b> ]	Country 25	Zip 29	30	untry			This corporation has liability for in Florida Statutes  Name and Address of New Reg	Yes [	) No	s. 199.032,
DAI	9. Name and Address of Cui	Itelit Ladistated Whelit	<u></u>	81	Name	10.	Haile site weetes of Hew Hee	hatelen 1	(gent	<del></del>
PAPINEAU, GARY 106 PALOMINO DRIVE				82		'ess (F	ss (P.O. Box Number is Not Acceptable)			
301	PITER FL 33458			83			· · · · · · · · · · · · · · · · · · ·	······································		······································
				B4	City			FL	85 Zir	p Code
office or agent 1.	to the provisions of Sections 607, registered agent, or both, in the St am familiar with, and accept the of Stgnaries based or protect name of registers.				e-named corp y the corporati s.		on submits this statement for the puboard of directors. I hereby accept	the app	changing pintment a	its registered is registered
12.	AND THE PERSON NAMED TO BE ADDRESS OF THE PERSON OF THE PE	AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	PRS IN 12
TITLE	D	DELETE	1.1 T	ITLE	···		ii		☐ Change	Addition
NAME	PAPINEAU, GARY		121	IAME						
STREET ADDRESS			1.35	TREET	T ADDRESS					
CITY - ST - 7IP	JUPITER FL 33458			1.4 CITY-ST-ZIP				<del>,</del> ,		
THLE	D CAROADOL MADEN	☐ DELETE	2.1 T						Change	Addition
NAME DEDUCT ADODS OF	CASCARDI, KAREN 106 PALOMINO DRIVE		•	IAME TREET	, Manager					
STREET ADDRESS CHTY+ST+ZIP	JUPITER FL 33458				T ADDRESS ST-ZIP					
TILE	OUT HEIT E GOTOU	DELETE	3.17		51-211				☐ Change	e Addition
NAME				IAME						<del></del>
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CITY- 51 - 719			3 4.	CITY-	ST-ZIP					
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STREET ADDRESS	ļ		1		T ADDRESS					
CITY : \$1 - ZIP					ST-ZIP					
TITLE		☐ DELETE	541		J1 . E!!		· · · · · · · · · · · · · · · · · · ·	<del></del>	Change	e Addition

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 hanged or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

NAME

STREET ADDRESS

CITY-\$1-ZIP

3-14-97 561/575-2431

**FILED** 

Apr 29 1997 8:00am

Secretary of State

e Phone # 0326290