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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700000975

KURLAND, SHELDON C

PEMBROKE PINES FL 33024

9853 PINES BLVD.

THE ULTIMATE FITNESS CLUB,	INC.					
Principal Place of Business	Mailing Address	( )				
201 S.E. SECOND STREET FT LAUDERDALE FL 33301	201 S.E. SECOND STREET FT LAUDERDALE FL 33301	DO NOT WRITE IN THIS SPACE				
		3. Date Incorporated or Qualifed 12/31/1996				
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For				
21	26	65-0721802 Not Applicable				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired				
City & State	City & State	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
	Zip Country	8. This corporation owes the current year Intangible Personal Property Tax.				
9. Name and Address of C		10. Name and Address of New Registered Agent				

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.

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City

Street Address (P.O. Box Number is Not Acceptable)

•	Transact many and accept the angular con-						
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent	t signature required when rein	nstating) , , ,	DATE		
12.	OFFICERS AND DIRECTORS		AC	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE .	P □ DEL	ETE 1.1 TITLE	,	454		Change	Addition
NAME	TORRENT, BEN	1.2 NAME					
STREET ADDRESS	201 S.E. 2ND STREET	1.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	1,4 CITY-ST	-ZIP				
TITLE	CFO DEL	ETE 2.1 TITLE				Change	Addition
NAME	TORRENT, LYNN	2.2 NAMÉ					
STREET ADDRESS	201 S.E. 2ND STREET	2.3 STREET	ADDRESS				
CiTY-ST-ZIP	FT. LAUDERDALE FL 33301	2. 4 CITY-S	T-ZIP				
TITLE	· DEL	ETE 3.1 TITLE				. Change	☐ Addition
NAME		3.2 NAME					
STREET ADDRESS		3.3 STREET	ADDRESS		。. Tan 的复数电压线	OWNER	SPEE
CITY-ST-ZIP	<u> </u>	3.4. CITY-S	T-ZIP			1 2 2 1 2 2 2 2 2 2	(4) (4) (5)
TITLE	. DEL	ETE 4.1 TITLE		• • • • •	1 112 141 14	Change:	Addition
NAME		4. 2 NAME			*		
STREET ADDRESS		4.3 STREET	ADDRESS		•		
CITY-ST-ZIP		4.4 CITY-ST	r-ZIP		<del></del>		
TITLE	□ DEL			5 a 9 a		☐ Change	☐ Addition
NAME		5.2 NAME				• '	
STREET ADDRESS	,	5.3 STREET					
CITY-ST-ZIP		5.4 CiTY-ST	r-ZiP				
TITLE	□ DEL					. Change	☐ Addition
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET	ADDRESS				`
CITY-ST-ZIP	W. H. W. Life and the second of the black of the second of the	6.4 CITY-ST	1				<u> </u>

14. I 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 informati 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, with all other like empowered.

**FILED** 

Feb 10, 1999 8:00am

**Secretary of State** 

02-10-1999 90037 012 \*\*\*150.00

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

Zip Code