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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000023647 (5)

EXCESS FITNESS REALTY, INC.

98 FEB -2 PM 12: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Principal Place of Business Mailing Address										1 1001/2001 5(0 10/11 100/1 -00/11 0 0/11 0 0/11 0 0/10 11/0	:98 IIII <b>1</b> III	11 <b>4</b>   <b>8</b>   1	19811981
701 BRICKELI SUITE 1900 MIAMI FL 331		SUITE	RICKELL AVEI 1900 FL 33131	NUE			DO NOT WRITE IN THIS	SPACE					
	. •									3, Date incorporated or Qualified 03/17/1997		,	
2, Principal P	lace of Busin	 10S5		1 :	2a. Mar	ling Address				4. FEI Numbor	Ti/	And	olied For
21 81 Washington Ave.					26 81 Washington AVenue						*-	<del></del>	Applicable
Suite, Apt	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #. etc.					5. Certificate of Status Desired	\$8.7	75 A	dditional			
22	2	27					5. Certificate of Status Desired	Fe	e Red	quired			
City & Stat		City & State					6. Election Campaign Financing	\$5.	00	Vlay Be			
23 Miami Beach, Florida					28 Miami Beach, Florida					Trust Fund Contribution	Add	led to	Fees
Zip			Country		_ Ζφ ••••		Cou		,	This corporation owes or has paid the cu			. •
24 33139		25	USA Address of Cu	]2	<u>-                                    </u>	3139	30	. U	SA	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes	نــا_	No
			Addiess of Co	Titelli He	ligiei ec	y w Bettr		61	Name	10. Name and Address of New Registered	Maur		
l	IITH, HARR		74 H IP					Ľ	THIRTIES				
701 BRICKELL AVENUE SUITE 1900									Street Add	Address (P.O. Box Number is Not Acceptable)			
		34						83					
MIL	AMI FL 331	)											
					1			84	Cily	FL	85	Zip C	ode
11. Pursuant	to the provis	ou <b>s</b>	of Sections 607	0502	607.18	08. Florida S	Statutes, the a	DOV	e-narned cor	poration submits this statement for the purpose of	of changin	ng its	registered
office or r	egistered ag	eyil, i	or both, in the s	State of Flo	orida S	ucti change	was authorize 5. Llorida Stat	d by	y the corpora	poration submits this statement for the purpose outlon's board of directors. I hereby accept the ap	pointmen	t as r	egistered
l		Öc		<del>//</del>		44	ery B.	51	ה. מדאמ				
SIGNATURE	Storature, typiod	or pun	ted many of registers	est agent and	bile r ayçı		(NO1L : Registore	d Ag	ert signature regin	ired when reinstating) DATE			
12.	/		OFFICERS	AND DIE	RECTOR		13.			ADDITIONS/CHANGES TO OFFICERS AN			
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City. St. 7iP									ST - 7/P	ν,			

14. 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 supplementation and accurate and that my signature shall have the same legal effect as if made under eath; 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