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 # P97000025043 (5)

THE SUPER SLOW EXERCISE SPECIALIST, INC.

FILED May 13 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address		— I INDIANUS I AND ANAMA BOURT BOURT DOUBL DURAN	HANDI MALLA DOMAN DADAD HAYI ADDI
612-205 KENWICK CIRCLE	612-205 KENWICK CIRCLE			
CASSELBERRY FL 32707	CASSELBERRY FL 327)f	DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualified	
			03/13/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	. Applied For
21	26		59-3477019	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Cauntry	Z(p	Country	8. This corporation owes or has paid the	
24 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current	Registered Agent		10, Name and Address of New Registers	ed Agent
hutchins, kenneth m		B1 Name		
612-205 KENWICK CIRCLE Casselberry FL 32707		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
		83		
		84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Stat	ites, the above-named corp	paration automite this statement for the purpose	of observing its registered
office or rogistered agent, or both, in the State of agent. I am familiar with and ageon thy obligati	Florida Such change was	authorized by the corpora	tion's board of directors. I hereby accept the a	ppointment as registered
Z W/ 1// 18 / 1//	ons ar, section 607.0505, i	ionua statules.	4/45/20	<i>≥ \\</i> \\
SIGNATURE Signature by set or punted name of registered agent.	and little if applicable. (No	TI Registered Agent signature requi	red when reinstating) DATE	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE D	☐ DÉLETE	1.1 TITLE		Change Addition
NAME HUTCHINS, KENNETH M		1.2 NAME		
STREET ADDRESS 612-205 KENWICK CIRCLE		1.3 STREET ADDRESS		
CITY-ST-ZIP CASSELBERRY FL 32707		1.4 CITY - S1 - ZIP		
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY - ST - ZIP	1 4.	
TITLE	DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		}
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		ļ
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		Did Dillies I I Worker		
TITLE		5.4 CITY - ST - 71P		
	☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
	☐ DEL€TE	6.1 TITLE		Change Addition
NAME STREET ADDRESS	☐ DELETE			Change Addition

14. Thereby 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 justice unipowered 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 of an attacipment with an address.

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