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 # P97000072793 (7)

FLORIDA FITNESS CENTER INC.

FILED Mar 16 1998 8:00am Secretary of State



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Principal Plac		38	Mailing Ad				- 1						
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101770772			10.10.41112	HATARIL IL USOO				DO NOT WRITE IN THIS SPACE					
									ncorporated	d or Qualified	d		·····
2. Principal F	lace of Busi	iness	2a. Mailing	Address		A		4. FEI Nu					Applied For
21 1441	Rang	oon Cove	26 144	26 1441 Rangoon Cove				59-	3496	800			lot Applicable
Suite, Apt.	#, e1c.		Suite, A	Suite, Apt. #, etc.					ate of State		X	\$8.75	Additional
22 NA			27 NA					o. Certino	ALE UI SIALI	us Desilea		Fee F	Required
City & State			City & :	City & State				6. Election	n Campaig	n Financing		\$5.00	May Be
	<u>Bree</u>	ze, FL	28 Gul					Trust F	und Contril	bution		Addec	to Fees
Zip		Country	Zip		Country	y	- 1					urrent year Ir	
3254	61	25 USA e and Address of Cui	29 325	61	30 USA					Tax due Ju			∐ No
			rent Registered A	jent	81	Name		D. Name	and Addre	ss of New I	tegistered	Agent	
	Jess, anti				*'	Name	NA						
	16 NAUTIL			62 Street Ad			Address	Address (P.O. Box Number is Not Acceptable)					
NA NA	WARRE FL	32568											
					83	1							
					84						FI	L ` `	Code
11. Pursuant	to the provis	sions of Sections 607.	0502 and 607.1508	Florida Statu	tes, the abov	e-namec	corpora	tion subm	its this state	ment for the	purpose	of changing	its registered
agent. La	registered aç am fa miliar w	gent, or both, in the St 7th, and accept the ob	ate of Florida, Such oligations of, Section	. change was 1 607. 050 5, Fl	authorizea o orida Statute	y ine cor s.	poration	s poard of	Girectors.	i nereby acc	ept the ap	pointment a	s registered
SIGNATURE													
	Signature types	d or printed name of registered	·	e. (NO	TE: Registered Ag	ent signatur	w beriupen e				DATE		
12.	, —	OFFICERS	AND DIRECTORS		13.		,	ADDITIO	NS/CHAN	GES TO OFF	ICERS AN	ID DIRECTO	
TITLE				DELETE	1.1 TITUE		l P	/T				☐ Change	Addition
NAME					1.2 NAME				Gues	s			
STREET ADDRESS	{				1.3 STREE	ADDRESS	144	1 Rai	ngoon	Cove			
CITY-ST-ZIP					1.4 CITY - 1	ST-ZIP			eze,		2561		
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NAME	ĺ				2.2 NAME		Jí	Ĩliar	ı Gue	BS	***		
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CITY-ST-ZIP					4.4 CITY - S	ST-ZIP	L	_					
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TITLE				DELETE	6.1 THLE							☐ Change	Addition
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STREET ADDRESS					6.3 STREET	ADDRESS							
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14. I hereby o	ertify that th	ne information supplied ual report or suppleme	with this filling doe	s not qualify for	or the exemp	tion state	ed in Sec	tion 119.0	7(3)(i), Flor	ida Statutes.	I further c	ertify that the	e information
officer or	director of th	he corporation or the r if changed, or on an a	eceiver or trustee e	mpowered to									

SIGNATURE: Athen A (D) March 1 Manthony W Guage 3/10