

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2002 8:00 am**  
**Secretary of State**

07-16-2002 90367 041 \*\*\*150.00

**DOCUMENT # P97000079530**

1. Entity Name

**LADIES FITNESS EXPRESS, INC.**

Principal Place of Business

**318 E. LAKE RD.  
 PALM HARBOR FL 34685**

Mailing Address

**318 E. LAKE RD.  
 PALM HARBOR FL 34685**

2. Principal Place of Business

**3454 TAMPA ROAD**

3. Mailing Address

**3454 TAMPA ROAD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**PALM HARBOR, FL 34685**

City & State  
**PALM HARBOR, FL 34685**

4. FEI Number **59-3467992**

Applied For

Not Applicable

Zip Country  
**34685 PINELLAS**

Zip Country  
**34685 PINELLAS**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WHITE, RONALD C  
 5348 1ST AVE., N.  
 ST. PETERSBURG FL 33710**

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00  
 After September 13, 2002 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
 NAME **GAMES, FRED**  
 STREET ADDRESS **318 E. LAKE RD.**  
 CITY-ST-ZIP **PALM HARBOR FL 34685**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Delete  
 NAME **GAMES, DELORES W**  
 STREET ADDRESS **318 E. LAKE RD.**  
 CITY-ST-ZIP **PALM HARBOR FL 34685**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**7-9-2002**

Date

Daytime Phone #

CR2E034 (4/02)

*Attachment*  
*# 729359*

LADIES FITNESS EXPRESS, INC.  
3454 TAMPA ROAD  
PALM HARBOR, FL 34685

JULY 12, 2002

FLORIDA DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
P O BOX 1500  
TALLAHASSEE, FL 32302

~~RE: P97000079530~~

WE ARE IN RECEIPT OF 2002 UBR REPORT. I HAVE ENCLOSED A CHECK IN  
THE AMOUNT OF \$150.00 FOR THE COST OF FILING THE YEARLY REPORT.  
WE MOVED OUR FACILITY AND DID NOT RECEIVE THE ORIGINAL RETURN.

THANK YOU FOR YOUR HELP IN THIS MATTER.

SINCERELY,

DELORES GARNES  
OWNER