

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 DEC -3 PM 4:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *P9800015552*

1. Entity Name

*Soho Personal Training, Inc.*

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

*1413 S. Howard Ave  
STE 101*

3. Mailing Address

*(Same)*

000009320950

12/03/02--01061--015 \*\*150.00

DO NOT WRITE IN THIS SPACE

City & State

*Tampa, FL*

City & State

4. FEI Number

*59-3497899*

Applied For

Not Applicable

Zip

*33606*

Country

*USA*

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

*TREVA GOULD*

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

*2515 West Kansas Ave*

City

*Tampa*

FL

Zip Code

*33629*

8. The above named

is changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature typed

(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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

*PRESIDENT  
TREVA GOULD  
1413 S. HOWARD AVE, STE 101  
TAMPA, FL 33606*

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

*VICEPRESIDENT  
CHELSEA GOULD  
1413 S. HOWARD AVE, STE 101  
TAMPA, FL 33606*

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

*SECRETARY  
CHELSEA GOULD  
1413 S. HOWARD AVE, STE 101  
TAMPA, FL 33606*

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

*TREASURER  
TREVA GOULD  
1413 S. HOWARD AVE, STE 101  
TAMPA, FL 33606*

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

*12/5*

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*11/27/02*

Date

*(813) 259-9939*

Telephone #

CR20348 (12/01)

1413 S. Howard Avenue, STE 101  
Tampa, FL 33606

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

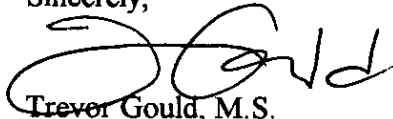
November 27, 2002

Dear Madam/Sir,

It came to my attention as I applied for a business loan that my corporation, Soho Personal Training, Inc. (formerly Bona Fide Bodies, Inc.) was currently inactive. Then, I remembered I had called in May of this year requesting a form be sent (after I had not received the first form in the mail). When I called on November 27, 2002, I spoke with Cathy in your office. Cathy found that the document was sent to 1413 South Harbor Avenue instead of South HOWARD Avenue. It is due to these minor problems I could not file my form. I am requesting that the reinstatement fee be waived and my form and the usual \$150 fee be accepted.

Thank you for your assistance in this matter. I look forward being reinstated soon!

Sincerely,



Trevor Gould, M.S.  
Soho Personal Training  
1413 S. Howard Ave., STE 101  
Tampa, FL 33606