

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

**PROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P98000023555**

1. Corporation Name

**KIDZ CLUB FITNESS CENTERS, INC.**

Principal Place of Business

**1605 SW 10TH CT  
FT LAUDERDALE FL 33312**

Mailing Address

**1605 SW 10TH CT  
FT LAUDERDALE FL 33312**

2. Principal Place of Business

**21 2009 N. UNIVERSITY**

Suite, Apt. #, etc.

**22 DRIVE**

City &amp; State

**23 SUNRISE, FL.**

Zip

**24 33322**

Country

**25 USA**

2a. Mailing Address

**26 Suite, Apt. #, etc.**

Suite, Apt. #, etc.

**27**

City &amp; State

**28**

Zip

**29**

Country

**30**

9. Name and Address of Current Registered Agent

**BERNIER, JEFF  
5560 SW CYPRESS RD  
PLANTATION FL 33317**

81. Name

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

83.

84. City

**FL**

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

7/1/99

12. OFFICERS AND DIRECTORS

11. TITLE ☐ DELETE

**D BOWCUTT, ORCHID  
1605 SW 10TH CT  
FT LAUDERDALE FL 33312**

12. NAME ☒ DELETE

**D BERNIER, JEFF  
5560 CYPRESS RD  
PLANTATION FL 33317**

13. CITY-ST-ZIP ☒ DELETE

**D BOWCUTT, STEVEN  
1605 SW 10TH CT  
FT LAUDERDALE FL 33312**

14. CITY-ST-ZIP ☒ DELETE

**D WASSERLAUF, RICHARD  
2872 PERSHING ST  
HOLLYWOOD FL 33020**

15. CITY-ST-ZIP ☐ DELETE

16. NAME

17. STREET ADDRESS

18. CITY-ST-ZIP

19. NAME

20. STREET ADDRESS

21. CITY-ST-ZIP

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE ☐ Change ☒ Addition12. NAME ☐ Change ☒ Addition13. STREET ADDRESS ☐ Change ☒ Addition14. CITY-ST-ZIP ☐ Change ☒ Addition21. TITLE ☐ Change ☒ Addition22. NAME ☐ Change ☒ Addition23. STREET ADDRESS ☐ Change ☒ Addition24. CITY-ST-ZIP ☐ Change ☒ Addition25. CITY-ST-ZIP ☐ Change ☒ Addition26. CITY-ST-ZIP ☐ Change ☒ Addition27. CITY-ST-ZIP ☐ Change ☒ Addition28. CITY-ST-ZIP ☐ Change ☒ Addition29. CITY-ST-ZIP ☐ Change ☒ Addition30. CITY-ST-ZIP ☐ Change ☒ Addition31. CITY-ST-ZIP ☐ Change ☒ Addition32. CITY-ST-ZIP ☐ Change ☒ Addition33. CITY-ST-ZIP ☐ Change ☒ Addition34. CITY-ST-ZIP ☐ Change ☒ Addition35. CITY-ST-ZIP ☐ Change ☒ Addition36. CITY-ST-ZIP ☐ Change ☒ Addition37. CITY-ST-ZIP ☐ Change ☒ Addition38. CITY-ST-ZIP ☐ Change ☒ Addition39. CITY-ST-ZIP ☐ Change ☒ Addition40. CITY-ST-ZIP ☐ Change ☒ Addition41. CITY-ST-ZIP ☐ Change ☒ Addition42. CITY-ST-ZIP ☐ Change ☒ Addition43. CITY-ST-ZIP ☐ Change ☒ Addition44. CITY-ST-ZIP ☐ Change ☒ Addition45. CITY-ST-ZIP ☐ Change ☒ Addition

14. 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 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 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, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/99 954-893-8800

Saturday, July 31, 1999

SEAN TONER  
FLORIDA DEPT. OF STATE  
DIVISION OF CORPORATIONS  
P.O. BX. 6327  
TALLAHASSEE, FL 32314

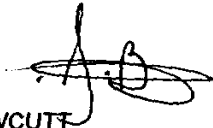
998- 23555

Dear SEAN: I AM REALLY DISAPPOINTED IN HOW MY PROBLEM HAS BEEN HANDLED. LET ME START BY GIVING YOU A LITTLE BACKGROUND.

SEVERAL MONTHS AGO I RECEIVED FIRST NOTICE PROFIT CORP. ANNUAL REPORT. KIDZ CLUB FITNESS CENTERS, INC WAS STILL NOT IN OPERATION. NOT KNOW WHAT TO DO, I CALLED THE NUMBER LISTED ON THE REPORT (850) 488-9000. THE PERSON ANSWERING TOLD ME TO WRITE A LETTER STATING THAT WE WERE NOT IN OPERATION. I DID EXACTLY THAT. SEVERAL MONTHS LATER I RECEIVED ANOTHER NOTICE THAT NOW STATES THAT I OWE \$550.00 INSTEAD OF THE ORIGINAL AMOUNT OF \$150.00. SO ONCE AGAIN I CALLED THE NUMBER LISTED. THIS TIME I SPOKE WITH JO SHE WAS SYMPATHETIC TO MY COMPLAINT AND SAID SEND THE ORIGINAL \$150.00 WITH LETTER STATING THE SAME. I DID THIS, THEN RECVD A LTR STATING THIS WAS NOT ACCEPTABLE. I AM NOT SURE WHAT TO DO AT THIS POINT. IT SEEMS AS THOUGH THE STATE WILL NOT TAKE RESPONSIBILITY FOR IT'S OWN ACTIONS.

PLEASE EXCEPT MY PAYMENT OF \$150.00 WHICH WAS SNT BACK WITH LTR.. I LOOK FORWARD TO HEARING FROM YOU ASAP.

Sincerely,



STEVEN BOWCUTT

PLEASE HELP ME TO RECTIFY THIS SITUATION ASAP, PRIOR TO SEPT. 10th. THIS MISTAKE WAS NOT INITIATED BY ME AND I FEEL THAT IT IS UNFAIR FOR ME TO PAY FOR A STATE EMPLOYEES MIS-GUIDANCE.



DAYTIME PHONE NUMBER 954-456-8188  
EVE. # 954-462-5755