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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P98000045942

1. Corporation Name

THE FIT GROUP, INC.							A MARKINGI MIN KUKUN MINIK BANTI	88191 88 111 88 111	eien nihi i inii	
Principal Place	of Business	Mailing Address	Mailing Address			7	1 1001/1001 1(0 10/0) 10/11 EDILI		MLMAN BILIN INNI	
2200 NE 16TH (CT.	2200 NE 16TH CT.	2200 NE 16TH CT.							
FT. LAUDERDAL		FT. LAUDERDALE FL 33305				DO NOT W	RITE IN THIS	CDACE		
	•					2	Date Incorporated or Qualife		SPACE	
Ì						3.	05/19/1998	, u		
2. Principal Pl	ace of Business	2a. Mailing Address				4.	FFI Number	. /	- Ar	pplied For
21		26	26				65-083806	,4	N _i	ot Applicable
Suite, Apt. i	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.			† <u>-</u>	Certifcate of Status Desired	П		Additional
22 City 8 State		27	27			5.	Certificate of Status Desired		Fee R	equired
		City & State	City & State			6.	Election Campaign Financin	g n	·	May Be
23		28				Trust Fund Contribution Added to Fees				
Zip				Country			This corporation owes the co	ırrent year In		
24	25	29	30			⊥_	Personal Property Tax.		☐Yes	□No
Name and Address of Current Registered Agent					Name	10.	Name and Address of Nev	v Registered	Agent	
FUHRMEISTER, J. CHRISTOPHER				31	Name					
2200 NE 16TH CT.			8	82 Street Addre			P.O. Box Number is Not Acce	ptable).		
FT. LAUDERDALE FL 33305			Ļ	_						
	MUDENDALE PL 33303		Į.	33					•	
				84 City FL 85 Zip Code						
11. Pursuant to	to the provisions of Sections 607 or egistered adjent, drybolity in the Sta m ramiliar with, and adjent the ob	0502 and 607.1506 Florida Statute of Florida. Such change was	utes, the about authorized before the control of th	ove- oy th	named corpo he corporation	oration on's bo	n submits this statement for the pard of directors. I hereby acc	ne purpose of cept the appo	changing its intment as re	s registered egistered
1								4/11	199	
SIGNATURE	Synature, typed or printed name of registered	beent and title if applicable. (NO	TE: Registered A	gent s	signature required	1 when n	einstating)	DATE		
12.	OFFICERS	AND DIRECTORS	13.				ADDITIONS/CHANGES TO C	FFICERS A		
TITLE	Đ	☐ DELETÉ	1,1 TITLE	E					Change	☐ Addition
NAME	FUHRMEISTER, J. CHRISTOI	PHER	1.2 NAM	E						
STREET ADDRESS 2200 NE 16TH CT.			1.3 STRE	1.3 STREET ADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL 33305			1.4 CITY-ST-ZIP						
TITLE		☐ DELETE	2.1 TITU						Change	Addition
NAME			2.2 NAM	2.2 NAME						
STREET ADDRESS	DDRESS		2.3 STRE	2.3 STREET ADDRESS						,
CITY-ST-ZIP			2.4 C/T	-	-ZIP		······································			
TITLE	<u> </u>	☐ DELETE	` 3.1 TTTL		-				Change	☐ Addition
NAME				3.2 NAME						
STREET ADDRESS			3.3 STR	3.3 STREET ADDRESS						
			3.4. CITY		-ZIP					
TITLE		☐ DELETE	4.1 TITLI						Change	☐ Addition
1 3143.00			A 2 NAK	45	•					

CITY-ST-ZIP CITY-ST-ZIP 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 suppliemental 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 repetive 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 of an attachment with an address, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 REET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ired

☐ DELETE

☐ DELETE

☐ Change

Change

☐ Addition

Addition

FILED Apr 15, 1999 8:00 am Secretary of State

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