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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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Jun	14.	200	18	:00	am
		ary			
		1 90014 (

DOCU 1. Corporat	JMENT # P18000	37376			
	Get fit for Li	*)	A0073282		
Principa Pa	ade or Business	Maing Address			
8	611 S.W. 94th	C+.			
	liami, Fl. 33173	DO NOT WRI 3. Date Incorporated or Qualified	TE IN THIS SPACE		
•	11am1/41. 33113	•		3. Pute incorporated of Qualified	1
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apr	e # Aic	Suite, Apt. #, etc.		65-086602	SR 75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Sta	ate	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	This corporation owes or has personal Property Tax due Jun	
24	9. Name and Address of Current			10. Name and Address of New F	<u> </u>
	0:10	•	81 Name		
	ventes Andre		82 Street Ade	dress (P.O. Box Number is Not Accepta	ble)
70	901 S.W. 36th	Teer.	83	<u> </u>	<u> </u>
. n	iam, Fl- 33155	5	84 City		1 85 Zip Code
L	to the provisions of Sections 607.0502			ropration submits this statement for the	FL
office or	registered agent, or both, in the State of am familiar with, and accept the obligat	f Florida. Such change was au	thorized by the corpora	ation's board of directors. Thereby acce	pt the appointment as registered
ŞIGNATURE		, and a			DAIE
12.	Signature, lyped or printed name of registered agent OFFICERS AND		Registered Agent signature requi	ADDITIONS/CHANGES TO OFF	
TITLE	PD	☐ DELETE	1.1 TITLE		Change Addition
NAME STREET LEAGUES	Fuentes, Andres	5 L 33155	1.2 NAME	•	
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NAME	Gallo, Tesus	33165	2 2 NAME		
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TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			G.3 STREET ADDRESS		
CITY-ST-ZIP 14. I hereby c	ertify that the information supplied with on this annual report or supplemental a	this filling does on avoid to	64 CITY+ST-7IP	Coation 110 P7/2)/// Fi	
officer or a	on this annual report or supplemental a director of the corporation or the receive or Block 13 if changed, or on an attack	of or trustee areas	ne exemplion stated in ate and that my signatu ecute this report as requ	re shall have the same legal effect as it uired by Chapter 607, Florida Statutes;	ruriner certify that the information i made under oath; that I am an and that my name appears in

PDC Accounting Services, Inc.

1212 N.W. 72nd Avenue ♦ Miami, FL. 33126 Phone 305.408.4104 ♦ Fax 305.477.1552

May 31, 2001

Division of Corporation Uniform Business Report Filing P.O. Box 1500 Tallahassee, FL. 32302-1500

Re: Get Fit For Life, Inc Document: #P98000057376

To Whom It May Concern:

I am the Accountant for the above clients. The reason for this letter is to request waiver of any late fee or penalties.

Unfortunately, my clients had not received the renewal form for 2001Uniform Business Report.

Not until I began to review there accounting and follow up in the corporation business matter that I realized they had not paid or report the renewal.

So along to this letter is a check for \$150.00 and a blank form with all my clients information and changes that should follow.

I would greatly appreciate any help in assisting my request to the matter.

Singerely

VIVIAN

Account