	PLEASE READ	ALLANS	RUCTIONS	BEFORE C	COMPLET	ING THIS FORM.		
1	PLICATION FOR STATEMENT	FL	A DELAR MA Kalar ar ar la Sea ar of s	NT OF STATE arris State RATIONS		FILE E		
DOCUMENT # P98000065432 1. Corporation Name					99 DET 19 PM 2: 53			
FITNESS PLUS INTERNATIONAL, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Malling Address				·	<u> </u>			
	versity dr suite \$10 Ings Fl 33065		3300 N UNIVERSITY DR SUITE 510 CORAL SPRINGS FL 33065					
	ddresses are incorrect in any way, line							
Suite, Apt	ncipal Office Address, If Applicable #. etc.	Sulte, Apt. #	ling Office Address, If	Applicable	Date Incorporated or Qualified To Do Business in Florida 07/27/1998			
City & State	8	City & State	City & State		1.6.6.0×1.1014.1		Applied For Not Applicable	
Zip	Country	Zip	Countr	У	6. CERTIFICAT		onal Fee required icate of Status	
7. Names	and Street Addresses of Each Officer a Name of Officers		de nonprofit corporations must list at le Street Address of Eac		T			
Title(s)	and/or Directors	3 Of	Officer and/or Directo		City / State / Zip			
D	HOMAN, BRIAN L	3300 N UNIVERS	300 N UNIVERSITY DR SUITE 51		0 CORAL SPRINGS FL 33065			
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					3	0000302699 -10/27/9901096 ****158.75 ***	37 -005 *158.75	
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8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent			
	N, BRIAN L			Street Address (P.O. Box Numbe	r is Not Acceptable)	040	
3300 N UNIVERSITY DR SUITE 510 CORAL SPRINGS FL 33065				Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.				
					City State Zip Code			
10. I, being	// - //	bove named corp			obligations of Sec			
Signature o Registered	Agent Dera JT	REGISTERED AC	BENT MUST SIGN	JIR(L-D)		Date		
this refr	nstatement application, the reason for d	ssolution has bee ne names of Indivi	n eliminated, the corp duals listed on this for	orate name satisfier rm do not qualify for	the requirement an exemption u	nepter 807 or 617, F.S. I further certify this of section 607.0401 or 617.0401, F.S., nder section 119.07(3)(I), F.S. The inform	that all fees	
SIGNAT	FURE SIGNATURE AND TYPED OR	PRINTED NAME OF	SIGNING OFFICER OR	DIRECTOR	·	Date Daytime Phot	P. 300)	

3300 University Drive, Ste 510 Coral Springs, FL 33065

phone:

954-796-9007 954-796-9007

Fitness Plus International, Inc.

October 14, 1999

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

We recently received a Notice of Administrative Dissolution or Revocation in the mail. I am confused, as I never received the annual return in the mail. We are in a large office building and the Fitness Plus name took many months to be installed into the building directory. We have many mall carriers that handle this building and they do not consistently deliver the Fitness Plus mail; as we have several companies in this suite. Fitness Plus is still an active corporation and there has been no break in that status. Had we received the corporate tax return we would have filed it with proper payment on a timely basis. I called the number on the notice and was advised to send in the annual fee of \$150.00 and a letter of explanation. I respectfully request an abatement of penalties, as we did not intentionally avoid payment of our annual fee. I am also enclosing an additional \$8.75 in order to receive a Certificate of Status.

Thank you in advance for your consideration of this request. Please contact me at 954-796-9007, ext. 211 if you have any questions or require additional information.

Sincerely,

Brian L. Homan