

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

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90044 031 ***150.00

DOCUMENT # PA8000069226

1. Entity Name

The Ultimate Workout Group, Inc ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6601 NW 14th Street

3. Mailing Address

1645 E HWY 193

Suite, Apt. #, etc.

Suite #2

Suite, Apt. #, etc.

Box

City & State

Plantation FL

City & State

Layton VT

Zip

33313

Country

USA

Zip

84048

Country

USA

4. FEI Number

650857352

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Richard J. Simone

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

4411 Cleveland AVE

City

FT. Meyers

FL

Zip Code

33901

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

4/25/02

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
P
William D. Green
6601 NW 14th ST #2
Plantation, FL 33313

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 duly empowered.

SIGNATURE:

William D. Green

WILLIAM D. GREEN

4-25-2002 1-800-688-6800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)