

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # P98000069406

1. Corporation Name
FITNESS & NUTRITION SUPER STORES, CORP.

Principal Place of Business
15141 S.W. 49TH ST.
MIRAMAR FL 33024

Mailing Address
15141 S.W. 49TH ST.
MIRAMAR FL 33024

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90050 011 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/10/1998

4. FEI Number

65-0906081

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CORA, ILEANA
12500 S.W. 5TH COURT
SUITE 403
PEMBROKE PINES FL 33027

10. Name and Address of New Registered Agent

81 Name JORGE GUTIERREZ
82 Street Address (P.O. Box Number is Not Acceptable)
15141 SW 49 ST
83
84 City MIRAMAR FL 85 Zip Code 33024

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 *Jorge Gutierrez* JORGE GUTIERREZ 3/19/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PSD ☒ DELETE
NAME CORA, ILEANA
STREET ADDRESS 12500 SW 5TH COURT, #403
CITY-ST-ZIP PEMBROKE PINES FL 33027

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE PD ☐ Change ☒ Addition
2.2 NAME JORGE GUTIERREZ
2.3 STREET ADDRESS 15141 SW 49 ST
2.4 CITY-ST-ZIP MIRAMAR FL. 33024

3.1 TITLE SD ☐ Change ☒ Addition
3.2 NAME MARIA ALICEA
3.3 STREET ADDRESS 15141 SW 49 ST
3.4 CITY-ST-ZIP MIRAMAR FL. 33024

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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: *Jorge Gutierrez* JORGE GUTIERREZ, President
Signature and typed or printed name of signing officer or director

3/19/99
Date Daytime Phone #

CR2E034 (11/98)