PRUFII CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9800069406

Mar 17, 1999 8:00 am Secretary of State 03-17-1999 90050 011 ***150.00

1. Corporation FITNESS	Name S & NUTRITION SUPER ST	ORES, CORP.					
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Principal Place	•	Mailing Address	_				
15141 S.W. 49TH ST. 15141 S.W. 49TH ST. MIRAMAR FL 33024			:		DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed		
	*				08/10/1998		
	lace of Business	2a. Mailing Address	5		4. FEI Number	Apr	olled For
21	, s	26			65-0906081		t Applicable
Suite, Apt. (#, etc.	Suite, Apt. #, etc	C-		5. Certificate of Status Desired	\$8.75 A Fee Re	
City & State	0	City & State			6. Election Campaign Financing	\$5.00	May Be
23	<u> </u>		ee ee ee ee a		Trust Fund Contribution	Added to	
Zip	Country	Zip	Count	itry	8. This corporation owes the current ye		
24	25	29	30		Personal Property Tax.		□No
~	9. Name and Address of Currer				10. Name and Address of New Regis	tered Agent	
	· ·			81 Name	TORGE GOTIERREZ		1
	A, ILEANA		<u> </u>	82 Street Addi	I U/2 GE GOTI GIZZE DI Iress (P.O. Box Number is Not Acceptable)		
	O S.W. 5TH COURT		1.	82) Street A001			
	E 403][83			
PEME	Broke Pines FL 33027		Ĺ				
			ļē	84 City Min	LAMAR	FL 85 39	ode 5024
11. Pursuant t	o the provisions of Sections 607.050	12 and 607.1508, Florida	Statutes, the abo	ove-named corp	poration submits this statement for the purpo	ose of changing its consistent as reg	registereo
SIGNATURE	Signature, typikil or printed plants of registered age	art and title if applicable.	JORG (NOTE: Registered A	ove-named corp by the corporation les.	poration submits this statement for the purpo lon's board of directors. I hereby accept the	19199	
SIGNATURE 12.	Signature, trojid or private duras of registered age OFFICERS AN	ant and title if applicable. ND DIRECTORS	(NOTE: Registered A)	ove-named corp by the corporation les. E GOTTED and a signature requires	poration submits this statement for the purpo- ion's board of directors. I hereby accept the	TE AND DIRECTOR	RS IN 12
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12. TITLE NAME STREET ADDRESS	Eligeneum, tropiel or princing during of regulators administration of the principle of the PSD CORA, ILEANA 12500 SW 5TH COURT, #403	art and title if applicable. ND DIRECTORS DELET	70-22-6 (NOTE: Ringistered A) 13. TE 1.1 TITLE 12 NAM 1.3 STRI	ove-named corporation test. Let Gorrisera liquidure require E LET ADDRESS	poration submits this statement for the purpo lon's board of directors. I hereby accept the	TE AND DIRECTOR	RS IN 12
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SIGNATURE: JORGE GUTTER REZ PRESIDENT 8/9/49