

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000083776

FILED  
Aug 29, 2007  
Secretary of State

**Entity Name:** ANTA'S FITNESS AND SELF DEFENSE, INC.

**Current Principal Place of Business:**

10721 NW 58 ST  
MIAMI, FL 33178

**New Principal Place of Business:**

**Current Mailing Address:**

9956 NW 51 TERR  
MIAMI, FL 33178

**New Mailing Address:**

FEI Number: 65-0866651

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ANTA, ELENA J  
9956 NW 51 TERR  
MIAMI, FL 33178 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ANTA, JULIO G  
Address: 5230 NW 109 AVE #104  
City-St-Zip: MIAMI, FL 33178

Title: STD ( ) Delete  
Name: ANTA, ELENA  
Address: 5230 NW 109 AVE #104  
City-St-Zip: MIAMI, FL 33178

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELENA J. ANTA

STD

08/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date