## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000085177

CARROLL FITNESS CORPORATION

## FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90001 007 \*\*\*158.75



| Principal Place of Business Mailing Address                                                                                               |                                                        |                                  |                       |                                                       |             |                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------------------------------|-----------------------|-------------------------------------------------------|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C/O FERRARO & ASSOCIATES. P.A. 200 SOUTH BISCAYNE BLVD. #3800  MANUEL 20124  C/O FERRARO & ASSOCIATES P.A. 200 SOUTH BISCAYNE BLVD. #3800 |                                                        |                                  | CIATES, F<br>LVD. #38 | P.A.<br>00                                            |             | 200 (100) (100) (100) (100) (100) (100) (100)                                                                                                                   |
|                                                                                                                                           |                                                        | MIAMI FL 33131                   |                       |                                                       |             | DO NOT WRITE IN THIS SPACE                                                                                                                                      |
|                                                                                                                                           |                                                        |                                  |                       |                                                       |             | 3. Date Incorporated or Qualifed                                                                                                                                |
| 2. Principa                                                                                                                               | I Place of Business                                    | 2a. Mailing Address              |                       |                                                       |             | 10/05/1998                                                                                                                                                      |
| 21                                                                                                                                        |                                                        |                                  |                       |                                                       |             | 4. FEI Number Applied For                                                                                                                                       |
|                                                                                                                                           | Suite, Apt. #, etc. Suite, Apt. #, etc.                |                                  |                       |                                                       |             | 65-0867922   Not Applicable                                                                                                                                     |
| 22                                                                                                                                        | 27                                                     |                                  |                       |                                                       |             | 60.75                                                                                                                                                           |
|                                                                                                                                           | City & State City & State                              |                                  |                       |                                                       |             | 5. Certificate of Status Desired \$8.75 Additional Fee Required                                                                                                 |
| 23                                                                                                                                        |                                                        |                                  |                       |                                                       |             | 6. Election Campaign Financing \$5.00                                                                                                                           |
| Zip                                                                                                                                       | Country                                                | 28                               |                       |                                                       |             | Trust Fund Contribution Added to Fees                                                                                                                           |
| 24                                                                                                                                        |                                                        |                                  | , Col                 | Country                                               |             | 8. This corporation owes the current year Intangible                                                                                                            |
|                                                                                                                                           | Name and Address of Current                            | 29                               | 30                    |                                                       |             | Personal Property Tax.                                                                                                                                          |
|                                                                                                                                           | and Address of Current                                 | Registered Agent                 |                       | <u> </u>                                              |             | 10. Name and Address of New Registered Agent                                                                                                                    |
| _RA                                                                                                                                       | FFERTY, WILLIAM L JR.                                  |                                  |                       | 81                                                    | Name        | me                                                                                                                                                              |
| C/O RAFFERTY, GUTIERREZ, ET. AL.                                                                                                          |                                                        |                                  |                       | 82 Street Address (P.O. Roy Number in Net 1           |             |                                                                                                                                                                 |
| 1101 BRICKELL AVENUE - SUITE 1400                                                                                                         |                                                        |                                  |                       | 82 Street Address (P.O. Box Number is Not Acceptable) |             |                                                                                                                                                                 |
|                                                                                                                                           | MI FL 33131                                            | J                                |                       | 83                                                    |             |                                                                                                                                                                 |
| , 1910                                                                                                                                    | 111111111111111111111111111111111111111                |                                  |                       | -                                                     |             |                                                                                                                                                                 |
|                                                                                                                                           |                                                        |                                  |                       | 84                                                    | City        | 85 Zip Code                                                                                                                                                     |
| 11. Pursuan                                                                                                                               | t to the provisions of Sections 607.0502               | and 607.1508, Florida Statute    | s. the ab             | OVE-                                                  | named       | <b>₽</b> ■                                                                                                                                                      |
| agent. 1                                                                                                                                  | am familiar with, and accept the obligation            | Florida. Such change was au      | thorized              | by t                                                  | he corp     | ed corporation submits this statement for the purpose of changing its registered prporation's board of directors. I hereby accept the appointment as registered |
| SIGNATURE                                                                                                                                 | ,                                                      | or, occaon 607.0003, Flon        | da Statu              | tes.                                                  |             | tooopt the appointment as registered                                                                                                                            |
|                                                                                                                                           | Signature, typed or printed name of registered agent a | nd title if applicable. (NOTE: I | Registered (          | looni .                                               | elanet      | re required when reinstating)                                                                                                                                   |
| 12.                                                                                                                                       | OFFICERS AND                                           | DIRECTORS                        | 13.                   | yen                                                   | aignature n |                                                                                                                                                                 |
| TITLE                                                                                                                                     | D                                                      | ☐ DELETE                         | 1.1 TITL              | F                                                     |             | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                               |
| NAME                                                                                                                                      | FERRARO, JAMES L                                       |                                  | 1.2 NAM               |                                                       |             | ☐ Change ☐ Addition                                                                                                                                             |
| STREET ADDRESS                                                                                                                            | 200 SOUTH BISCAYNE BLVD. #3                            | RAAA                             | 1                     |                                                       | [           |                                                                                                                                                                 |
| CITY-ST-ZIP                                                                                                                               | MIAMI FL 33131                                         | ~~~                              |                       |                                                       | DORESS      | is                                                                                                                                                              |
| ITLE                                                                                                                                      | D                                                      | ☐ DELETE                         | 1.4 CITY              | _                                                     | ZIP         | <del></del>                                                                                                                                                     |
| NAME                                                                                                                                      | CARROLL, WESLEY                                        | C petrie                         | 2.1 TITL              |                                                       |             | ☐ Change ☐ Addition                                                                                                                                             |
| TREET ADDRESS                                                                                                                             | 200 SOUTH BISCAYNE BLVD. #3                            | 000                              | 2.2 NAM               | E                                                     |             |                                                                                                                                                                 |
| CITY-ST-ZIP                                                                                                                               | MIAMI FL 33131                                         | 800                              | 2.3 STRE              | ET AC                                                 | DDRESS      | s                                                                                                                                                               |
| ITLE I                                                                                                                                    | D                                                      |                                  | 2. 4 CITY             | '-ST-2                                                | ZIP         |                                                                                                                                                                 |
| AME I                                                                                                                                     | _                                                      | ☐ DELETE                         | 3.1 TITLE             |                                                       |             | ☐ Change ☐ Addition                                                                                                                                             |
| TREET ADDRESS                                                                                                                             | RAFFERTY, WILLIAM L JR.                                |                                  | 3.2 NAME              | Ξ                                                     |             |                                                                                                                                                                 |
|                                                                                                                                           | 1101 BRICKELL AVENUE #1400                             |                                  | 3.3 STRE              | ET AD                                                 | DRESS       | s                                                                                                                                                               |
| ITY-ST-ZIP                                                                                                                                | MIAMI FL 33131                                         |                                  | 3.4. CITY             | -ST-Z                                                 | (IP         |                                                                                                                                                                 |
| i                                                                                                                                         |                                                        | ☐ DELETE                         | 4.1 TITLE             |                                                       | -+          |                                                                                                                                                                 |
| AME                                                                                                                                       |                                                        |                                  | 4. 2 NAM              | •                                                     |             | Change Addition                                                                                                                                                 |
| TREET ADORESS                                                                                                                             |                                                        |                                  | 4.3 STRE              | FTAD                                                  | DRESS       |                                                                                                                                                                 |
| TY-ST-ZIP                                                                                                                                 |                                                        |                                  | 4.4 CITY-             |                                                       | - 1         |                                                                                                                                                                 |
| TLE                                                                                                                                       |                                                        | ☐ DELETE                         | 5.1 TITLE             | -1-CI                                                 | -+          |                                                                                                                                                                 |
| WE                                                                                                                                        |                                                        |                                  | 5.2 NAME              |                                                       |             | ☐ Change ☐ Addition                                                                                                                                             |
| REET ADDRESS                                                                                                                              |                                                        |                                  | 5.3 STREE             |                                                       | DRESS       |                                                                                                                                                                 |
| Y-ST-ZIP                                                                                                                                  |                                                        |                                  | 5.4 CITY-5            |                                                       |             |                                                                                                                                                                 |
| LE                                                                                                                                        |                                                        | ☐ DELETE                         | 6.1 TITLE             | -411                                                  |             |                                                                                                                                                                 |
| ME                                                                                                                                        |                                                        |                                  | 6.2 NAME              |                                                       |             | ☐ Change ☐ Addition                                                                                                                                             |
| REET ADDRESS                                                                                                                              |                                                        |                                  |                       | * ***                                                 | ,DE06       |                                                                                                                                                                 |
| Y-ST-ZIP                                                                                                                                  |                                                        |                                  | 6.3 STREE             | I AUO                                                 | IKESS       |                                                                                                                                                                 |

4. 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 Block 12 or Block 13 if changed, or bif at attachment with an address, with all other like empowered.

IGNATURE:

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR