2005 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P98000100547 1. Entity Name ZONÉ FITNESS INCORPORATED

Principal Place of Business

8041 SW 69 AVE MIAMI, FL 33143

SIGNATURE:

Mailing Address

201 ALHAMBRA CIR STE 502

CORAL GABLES, FL 33134

FILED Apr 29, 2005 08:00 AM Secretary of State



CR2E034 (10/03)

305799-5521

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0879772	Not Applicable

\$8.75 Additional 5. Certificate of Status Desired Fee Required

5. Name and Address of Current Registered Agent ARVESU, MANUEL M ESQ. 201 ALHAMBRA CIR STE 502

DO NOT WRITE IN THIS SDACE

No Chg-P

01312005

CORAL GABLES, FL 33134			IN THIS SPACE		
	tions of registered agent.			h, In the State of Florida. I am familiar with, and accept	
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Agen	t signature required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	 Election Campaign Financing Trust Fund Contribution. 	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	The second secon	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ECHELES, JORAM 9800 SW 69TH CT MIAMI, FL 33156				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD HERNANDEZ, EDWARD 4501 SW 14TH ST. CORAL GABLES, FL 33134			000000342088 04/29/05-80043-006 158.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CRY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby of indicated of the corp changed,	certify that the information supplied with this fil on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with go-ecoress with all	ing does not qualify for the exemption accurate and that my signature side execute this report as required by other like empowered.	n stated in Section 119.07(3)(i nall have the same legal effect y Chapter 607, Florida Statutes), Florida Statutes. I further certify that the information as if made under oath; that I am an officer or directors; and that my name appears in Block 10 or Block 11 if	