

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000087766

FILED
Apr 20, 2002 8:00 AM
Secretary of State

Entity Name: THE BODY PERFECT, INC.

Current Principal Place of Business:

8551 WEST SUNRISE BLVD STE #208
PLANTATION, FL 33322

New Principal Place of Business:

Current Mailing Address:

8551 WEST SUNRISE BLVD STE #208
PLANTATION, FL 33322

New Mailing Address:

FEI Number: 65-0957498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHENKIN, DAVID
8551 WEST SUNRISE BLVD STE #208
PLANTATION, FL 33322

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: GANGI, ROBERT J
Address: 8551 WEST SUNRISE BLVD STE #208
City-St-Zip: PLANTATION, FL 33322

Title: DP (X) Delete
Name: CANAVIN, RICHARD K
Address: 8551 WEST SUNRISE BLVD STE #208
City-St-Zip: PLANTATION, FL 33322

Title: DS (X) Delete
Name: MEDEIROS, DAVID
Address: 8551 WEST SUNRISE BLVD STE #208
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT J. GANGI

DCEO

04/20/2002

Electronic Signature of Signing Officer or Director

_____ Date