

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) 03

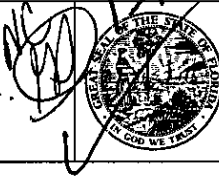
FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90247 038 ***150.00

DOCUMENT # S49380

1. Entity Name

~~D. WALL, INC.~~ change to: **Fitwise, Inc.**



Principal Place of Business

2507 W EDGEWOOD RD
TAMPA FL 33609
US

Mailing Address

2507 W EDGEWOOD RD
TAMPA FL 33609
US

2. Principal Place of Business

1761 W. Fletcher Ave.

Suite, Apt. #, etc.

3. Mailing Address

1761 W. Fletcher Ave.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33612

Country

USA

Zip

33612

Country

USA

4. FEI Number

59-3073444

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

WALL, DANIEL R
2507 W EDGEWOOD RD
TAMPA FL 33609

7. Name and Address of New Registered Agent

Name

Wall, Daniel R.

Street Address (P.O. Box Number is Not Acceptable)

1761 W. Fletcher Ave.

City

Tampa

FL

Zip Code

33612

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

D. Wall

2/12/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME WALL, DANIEL ROBERT
STREET ADDRESS 2507 W EDGEWOOD RD
CITY-ST-ZIP TAMPA FL 33609

TITLE ST ☐ Delete
NAME WALL, KIM N
STREET ADDRESS 2507 W EDGEWOOD RD
CITY-ST-ZIP TAMPA FL 33609

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME Wall, Daniel Robert
STREET ADDRESS 4620 Westford Circle
CITY-ST-ZIP Tampa, FL 33624

TITLE ST ☒ Change ☐ Addition
NAME Wall, Kim N.
STREET ADDRESS 4620 Westford Circle
CITY-ST-ZIP Tampa, FL 33624

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

D. Wall **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/03 813-960-9200

Date

Daytime Phone #

CR2E034 (10/02)