2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

Apr 23, 2005 08:00 AM **Secretary of State DOCUMENT # S53335** 1. Entity Name BODY BY DESIGN, INC. Principal Place of Business - Mailing Address 17 DAVIS BLVD. 17 DAVIS BLVD. SUITE 307 SUITE 307 TAMPA, FL 33606-0400 TAMPA, FL 33606-0400 CR2E034 (10/03) 03012005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3066564 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MISNER, MARK DO NOT WRITE 17 DAVIS BLVD SUITE 307 IN THIS SPACE TAMPA, FL 33606 e of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this s 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MISNER, MARK NAME 17 DAVIS BLVD., STE 307 STREET ADDRESS CITY-ST-ZIP TAMPA, FL U00000326079 04/23/05-80043-008 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 empoyered 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 addr

ING OFFICER OR DIRECTOR

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