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

Apr 23 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sendre B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V17649 (7) WEIGHTS ON WHEELS, INC. Principal Place of Business Mailing Address 2109 LAKE BASS CIR 2109 LAKE BASS CIR LAKE WORTH FL 33461 LAKE WORTH FL 33461 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 65-0312490 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
Percent Property Tax due June 30. Yes No Zip Country 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RYAN, DANIEL J 2109 LAKE BASS CIR 82 Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33461 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ OF LETE Change Addition TITLE 1.1 TITLE NAME RYAN, DANIEL J. 1.2 NAME CR2E034 2109 LAKE BASS CIR STREET ADORESS 1.3 STREET ADDRESS LAKE WORTH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2 1 TITLE THILE TS RYAN, CHRISTY B 2.2 NAME NAME 2109 LAKE BASS CIRCLE 2.3 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3 1 TITLE ☐ Change TITLE NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Addition Change TILLE 4.1 THILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIF Addition DELETE TITLE 51 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

FILED

Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Daniel D. Russe / DANIEL J. RYAN 4/16/98 / S61) 588-1988

14. Thereby certify that the information supplied with this filling 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 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