**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jan 27, 2002 8:00 am Secretary of State V17649 DOCUMENT # 1. Entity Name 01-27-2002 90030 044 \*\*\*150.00 WEIGHTS ON WHEELS, INC. Principal Place of Business Mailing Address 300 VENICE DRIVE 300 VENICE DRIVE HOUSE HOUSE **BOYNTON BEACH FL 33426 BOYNTON BEACH FL 33426** 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0312490 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RYAN, DANIEL J. 2109 LAKE BASS CIR LAKE WORTH FL 33461 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. CR2E034 (9/01) ☐ Addition Delete TITLE TITLE RYAN, DANIEL J. RYAN DANIEL J NAME NAME 2109 LAKE BASS CIR STREET ADDRESS BOOVENICE DR. STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP CITY-ST-ZIP BOYNTON BCH. ☐ Addition TS ☐ Delete TITLE TITLE RYAN, CHRISTY B NAME RYAN, CHRISTY B NAME 2109 LAKE BASS CIRCLE STREET ADDRES STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

changed, or on an attachment with an address, with all other like empowered

13. 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 11 or Block 12 if