FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V23339 (7)

1. Corporation Name
BUILT TO LAST FITNESS CENTER, INC.

Principal Place of Business
6520 INDUSTRIAL AVE., SUITES 3 & 4
COMMERCE EXECUTIVE CENTER
PORT RICHEY FL 34668

Mailing Address
6520 INDUSTRIAL AVE., SUITES 3 & 4
COMMERCE EXECUTIVE CENTER
PORT RICHEY FL 34668

3. Date Incorporated or Qualified: 03/24/1992
3a. Date of Last Report: 03/06/1995

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: 59-3114295 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**

CARTER, DAVID R., ESQ.
7419 U.S. HIGHWAY 19
NEW PORT RICHEY FL 34652-1240

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ NOTE: Registered Agent's signature required when reinstating ______ DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	IOPPOLO, ANTHONY J.	
STREET ADDRESS	6520 INDUSTRIAL AVE.	
CITY-ST-ZIP	PORT RICHEY FL	
TITLE	V	☐ DELETE
NAME	IOPPOLO, JOSEPH M.	
STREET ADDRESS	6520 INDUSTRIAL AVE.	
CITY-ST-ZIP	PORT RICHEY FL	
TITLE	T	☐ DELETE
NAME	IOPPOLO, CAROLINE J	
STREET ADDRESS	6520 INDUSTRIAL AVE	
CITY-ST-ZIP	PT RICHEY FL	
TITLE	S	☐ DELETE
NAME	BRODSKY, BELINDA ANN	
STREET ADDRESS	6520 INDUSTRIAL AVE.	
CITY-ST-ZIP	PORT RICHEY FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Tony Ioppolo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
TONY J. IOPPOLO (PRES.)

2/21/96 Date
844-3337 Daytime Phone #

CR2E034 (12/95)