

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

FILED

Feb 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mc... Secretary of 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 34668-6822	
2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 03/24/1992		3a. Date of Last Report 02/27/1996	
4. FEI Number 59-3114295		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 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: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P IOPPOLO, ANTHONY J. 6520 INDUSTRIAL AVE. PORT RICHEY FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 4448 U.S. HWY. 19 NEW PORT RICHEY FLA. 34652
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IOPPOLO, JOSEPH M. 6520 INDUSTRIAL AVE. PORT RICHEY FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4448 U.S. HWY. 19 NEW PORT RICHEY FLA. 34652
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T IOPPOLO, CAROLINE J 6520 INDUSTRIAL AVE PT RICHEY FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4448 U.S. HWY. 19 NEW PORT RICHEY FLA. 34652
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRODSKY, BELINDA ANN 6520 INDUSTRIAL AVE. PORT RICHEY FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 4448 U.S. HWY. 19 NEW PORT RICHEY FLA. 34652
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. I do 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 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: Anthony J. Ioppolo (PRDG) 1/19/97 913-844-3337			

CR2E034 (9/96)