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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V38269

(9)

BB GYM, INC.

Mailing Address

201 N US ONE, STE C-6 JUPITER FL 33477

Principal Piace of Business

201 N US ONE. STE C-6 JUPITER FL 33477-5106

FILED Apr 14 1997 8:00am Secretary of State



							3. Date Incorporated or Qualified 05/20/1992	3a. Dat 01/2	e of La:		ort
2. Principal Pa	ace of Business	2a. Mailing Ac	ldress				4. FEI Number			Appli	ed For
11		26					65-0339413 Not Applica				Applicable
Suite, Apt #, etc		} <u>-</u>	Suite, Apt. #, etc				6. Certificate of Status Desired			\$8.75 Additional Fee Required	
City & State)	Cily & Stal	le				6. Election Campaign Financing Trust Fund Contribution			M OO	
Zφ	Country	Zip		Coun	ntry		8. This corporation has liability for	intangible 1	tax und	ers. 1	99.032,
4	25	29		30				Yes [
	9. Name and Address of Curr	ent Registered Ager	nt	<u> </u>			10. Name and Address of New Re	gistered A	gent		
I EVA	NE, RICHARD L.			1	81	Name					
201 N. US HWY 1 STE C-8					200 Charles (D.O. Barrista in Mark Association						
					82 Street Address (P.O. Box Number is Not Acceptable)						
JUPI	ITER FL 33477-5106				B3						
				1	-						
				Ī	64	City		FL	85	Zip Co	de
					\perp		poration submits this statement for the				
SIGNATURE	Segretary type dior punted name of registered	agent and title if applicable.	(NOI)	E- Registered	Ager	ni signature requi	ired when reinstalling)	DATE		,	
12.		AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	CERS AND	DIREC	TORS	IN 12
THLE	D		DELETE	1.1 TITI	LE				Char	nge	Addition
NAME	LEVINE, RICHARD L.			1.2 NA	ME		•				
STREET ADDRESS	2921 BRI HEN TK RD			13 STE	REFT A	ADDRESS					
1	ROCHESTER NY			1.4 CIT		1					
CHY-ST-ZP TOLE	ROOTLOTER IVI		DELETE	2.1 TIT		1-21			☐ Char	nge	Addition
NAME		_		2.2 NA						•	
	ļ			2.2 (174							
				22010	0001	ADDRESS					
						ADDRESS	3 <u></u>				
Crty+Si+ZiP	 		DELETE	2. 4 CI	TY-S				Char	nge	Addition
TITLE	 		DELETE	2. 4 CI 3.1 TIT	TY-S LE				Char	nge	Addition
CHY-SI-ZIP TITLE NAME			DELETE	2. 4 CI 3.1 TIT 3.2 NA	TY-S L€ ME	ST-ZIP			Char	nge	Addition
CHY-SI-ZIP TITLE NAME SPREET ADDRESS			DELETE	2. 4 CI 3.1 TIT 3.2 NAI 3.3 STF	TY-S LE Me Reet	ST-ZIP ADDRESS			Chai	nge	Addition
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CHY-SI-ZIP TITLE NAME SPEEL ADDRESS CHY-SI-ZIP TITLE NAME				2. 4 CI 3.1 TII 3.2 NAI 3.3 STF 3.4 CI 4.1 TII 4. 2 NA	TY-S LE ME REET : TY-S LE AME	ADDRESS ST - ZIP					
CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	***************************************			2. 4 CI 3.1 TII 3.2 NAI 3.3 STI 3.4. CI 4.1 TII 4. 2 NAI 4.3 STI	TY-S LE ME REET TY-S LE AME REET	ADDRESS ST-ZIP ADDRESS ADDRESS					
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COLY-ST-ZIP TITLE NAME SPEET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME			DELÉTE	2. 4 Cl ² 3.1 YiT 3.2 MAI 3.3 SIF 3.4 Cl ² 4.1 YiT 4.2 NA 4.3 SII 4.4 Cl ² 5.1 YiT 5.2 NA	TY-S LE REET TY-S LE AME REET LE TY-SI LE LE LY-SI	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			☐ Char	nge	Addition
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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:

Quarte AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-97 (SU)

(50)793-3700 Daylinie Phone #