

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000141412

**Entity Name:** MAX'D OUT FITNESS CENTER INC.

**Current Principal Place of Business:**

3114 LEE BLVD  
BLDG C  
LEHIGH ACRES, FL 33971

**Current Mailing Address:**

3114 LEE BLVD  
BLDG C  
LEHIGH ACRES, FL 33971 US

**FEI Number:** 20-3725109

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JUSTIN DELACRUZ  
3114 LEE BLVD  
BLDG C  
LEHIGH ACRES, FL 33971 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            DELACRUZ, JUSTIN  
Address        3114 LEE BLVD  
                  BLDG C  
City-State-Zip: LEHIGH ACRES FL 33971

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUSTIN DELACRUZ

PRES

03/12/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date