## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000067477

Entity Name: M.D. COMPLETE FITNESS INC.

**Current Principal Place of Business:** 

**UNIT 101** TRINITY, FL 34655

8351 STATE ROAD ROUTE 54

## **Current Mailing Address:**

8441 BASUTO DRIVE TRINITY, FL 34655

FEI Number: 32-0256271 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DUMOVICH, MICHELLE M 8441 BASUTO DRIVE TRINITY, FL 34655 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

**FILED** Jan 11, 2015

**Secretary of State** 

CC8873810567

## Officer/Director Detail:

Title Title Т

DUMOVICH. MICHELLE DUMOVICH, MICHELLE Name Name Address 8441 BASUTO DRIVE Address 8441 BASUTO DRIVE TRINITY FL 34655 TRINITY FL 34655 City-State-Zip: City-State-Zip:

Title **SECRETARY** Title

Name DUMOVICH, MICHELLE Name DUMOVICH, MARK E 8441 BASUTO DRIVE Address Address 8441 BASUTO DRIVE City-State-Zip: TRINITY FL 34655 City-State-Zip: TRINITY FL 34655

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: MICHELLE DUMOVICH

**PRESIDENT** 

01/11/2015