

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V67661

**Entity Name:** ATHLETE'S FITNESS CENTER, INC.

**Current Principal Place of Business:**

13539 N FLORIDA AVENUE  
TAMPA, FL 33613

**Current Mailing Address:**

13539 N FLORIDA AVENUE  
TAMPA, FL 33613

**FEI Number:** 59-3164958

**Certificate of Status Desired:** No

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

RUIZ & SKELTON P.A.  
5301 W CYPRESS STREET  
SUITE 108  
TAMPA, FL 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           | PD                  | Title           | STD                 |
| Name            | PRIETO, JERRY       | Name            | PRIETO, TERI        |
| Address         | 13539 N FLORIDA AVE | Address         | 13539 N FLORIDA AVE |
| City-State-Zip: | TAMPA FL            | City-State-Zip: | TAMPA FL            |

*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:** JERRY PRIETO

**OWNER**

**04/20/2023**

Electronic Signature of Signing Officer/Director Detail

Date