## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000093040

**Entity Name: FITMARKET, LLC** 

**Current Principal Place of Business:** 

690 SW 1ST CT **SUITE 1514** MIAMI, FL 33130

**FILED** Mar 25, 2014 **Secretary of State** CC1378712986

## **Current Mailing Address:**

690 SW 1ST CT **SUITE 1514** MIAMI, FL 33130 US

FEI Number: 46-3078571 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

MPE CONSULTING, CORP 2700 GLADES CIRCLE SUITE 127 WESTON, FL 33327 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

Authorized Person(s) Detail:

Title **CFO** Title DIRECTOR

ZABALA, JANETH Name Name SCOON, SOPHIA

2700 GLADES CIRLCE 690 SW 1ST CT Address Address

SUITE 127 **SUITE 1514** 

City-State-Zip: WESTON FL 33327 City-State-Zip: MIAMI FL 33130

Title COO

Name ABOU KHALIL, PAULA

1200 BRICKELL BAY DRIVE Address

**APT 204** 

City-State-Zip: MIAMI FL 33131

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail