

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000054307

Entity Name: BARIATRIC SUPERMARKET.COM, INC.

FILED
Apr 29, 2006
Secretary of State

Current Principal Place of Business:

318 INDIAN TRACE #182
WESTON, FL 33327

New Principal Place of Business:

318 INDIAN TRACE #182
WESTON, FL 33326

Current Mailing Address:

318 INDIAN TRACE #182
WESTON, FL 33327

New Mailing Address:

318 INDIAN TRACE #182
WESTON, FL 33326

FEI Number: 20-2669712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEFKOWITZ, LEE
318 INDIAN TRACE #182
WESTON, FL 33327 US

Name and Address of New Registered Agent:

LEFKOWITZ, LEE
318 INDIAN TRACE #182
WESTON, FL 33326 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:

04/29/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEFKOWITZ, LEE
Address: 318 INDIAN TRACE #182
City-St-Zip: WESTON, FL 33327 US

Title: D () Delete
Name: LEFKOWITZ, MICHELE
Address: 318 INDIAN TRACE #182
City-St-Zip: WESTON, FL 33327 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEFKOWITZ, LEE
Address: 318 INDIAN TRACE #182
City-St-Zip: WESTON, FL 33326 US

Title: D (X) Change () Addition
Name: LEFKOWITZ, MICHELE
Address: 318 INDIAN TRACE #182
City-St-Zip: WESTON, FL 33326 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEE LEFKOWITZ

D

04/29/2006

Electronic Signature of Signing Officer or Director

Date