## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000076780

Entity Name: QUICK WEIGHT LOSS CENTERS, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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4350 WEST SUNRISE BLVD., STE. 122 PLANTATION, FL 33313

Current Mailing Address: New Mailing Address:

4350 WEST SUNRISE BLVD., STE. 122 PLANTATION, FL 33313

FEI Number: 65-1130244 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TEPPS, JEROME L
2700 W. CYPRESS CREEK RD.
D 130
FT. LAUDERDALE, FL 33309 US
TEPPS, JEROME L
10167 W. SUNRISE BLVD.
3RD FLOOR
PLANTATION, FL 33322 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: 04/29/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: PD (X) Change ( ) Addition

Name: SCHUMAN, PHILLIP R Name: SCHUMAN, PHILLIP

Address: 4350 WEST SUNRISE BLVD., STE. 122 Address: 4350 WEST SUNRISE BLVD., STE. 122

City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313

Title:VD() DeleteTitle:VD(X) Change () AdditionName:SCHUMAN, PHILIP AName:SCHUMAN, CHRISTOPHERAddress:4350 W. SUNRISE BLVD., STE. 122Address:4350 W. SUNRISE BLVD., STE. 122

City-St-Zip: PLANTATION, FL 33313 City-St-Zip: PLANTATION, FL 33313

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ALLEN, LYNN S
 Name:

 Address:
 4350 W. SUNRISE BLVD., STE 122
 Address:

 City-St-Zip:
 PLANTATION, FL 33313
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: LYNN S. ALLEN SD 04/29/2008