

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031344

FILED
Feb 25, 2004
Secretary of State

Entity Name: OPTIMAL WEIGHT LOSS, L.L.C.

Current Principal Place of Business:

5816 N.W 54TH WAY
GAINESVILLE, FL 32653

New Principal Place of Business:

6400 W. NEWBERRY RD.,
SUITE 206
GAINESVILLE, FL 32605

Current Mailing Address:

5816 N.W 54TH WAY
GAINESVILLE, FL 32653

New Mailing Address:

FEI Number: 57-1183340 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREGORY, PATRICIA
5816 N.W 54TH WAY
GAINESVILLE, FL 32653

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: GREGORY, FREDERICK G
Address: 5816 NW 54TH WAY
City-St-Zip: GAINESVILLE, FL 32653

Title: MGR () Change (X) Addition
Name: GREGORY, PATRICIA
Address: 5816 NW 54TH WAY
City-St-Zip: GAINESVILLE, FL 32653

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: PATRICIA GREGORY

MGR

02/25/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date