## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107478

Entity Name: MEDI-WEIGHTLOSS CLINICS, LLC

FILED Jan 23, 2008 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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777 SOUTH HARBOUR ISLAND BLVD. SUITE 130

TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

777 SOUTH HARBOUR ISLAND BLVD. SUITE 130 TAMPA, FL 33602

FEI Number: 20-3753744 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:

KALOUST, EDWARD 777 SOUTH HARBOUR ISLAND BLVD. SUITE 130 TAMPA, FL 33602 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

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: CEO ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 KALOUST, EDWARD
 Name:

 Address:
 921 SEADON COVE
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 City-St-Zip:

Title: P ( ) Delete Title: PRES (X) Change ( ) Addition

Name: EDLAND, JAMES Name: EDLUND, JAMES

Address: 700 SOUTH HARBOUR ISLAND CONDO #125 Address: 777 SOUTH HARBOUR ISLAND UNIT #130

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33602

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 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: PRESIDENT CEO 01/23/2008