2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2010
Secretary of State

DOCUMENT# L09000084235

Entity Name: PHYSICIAN SYSTEM WEIGHT MANAGEMENT, LLC

Current Principal Place of Business:

603 NORTH FLAMINGO ROAD
SUITE 361
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

603 NORTH FLAMINGO ROAD
SUITE 361
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLASSMAN, LEE D ESQ
2200 NORTH COMMERCE PARKWAY
SUITE 105
WESTON, FL 33326 US

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/MANAGERS:

Title: MGR
Name: SMITH, DOUGLAS
Address: 603 NORTH FLAMINGO ROAD, SUITE 361
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGR
Name: GOLDBERG, TODD
Address: 603 NORTH FLAMINGO ROAD, SUITE 361
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby 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 Statues.

SIGNATURE: DOUGLAS SMITH MGR 02/16/2010

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