2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# P02000068168

Entity Name: WEIGHT DOWN, INC.

Current Principal Place of Business:

3976 GROVE PARK DRIVE
TALLAHASSEE, FL 32311

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3208
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number: 04-3743790 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZIFFER, GIL
3976 GROVE PARK DRIVE
TALLAHASSEE, FL 32311

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEOP ( ) Delete
Name: LIFSHITZ, FIMA
Address: 1040 ALSTON ROAD
City-St-Zip: SANTA BARBARA, CA 93108

Title: ST ( ) Delete
Name: LIFSHITZ, JERE
Address: 1040 ALSTON ROAD
City-St-Zip: SANTA BARBARA, CA 93108

Title: D ( ) Delete
Name: SCHREIBER, GERHARDT
Address: 2222 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: LIFSHITZ, ERIC
Address: 818 NORTH DOHENY DRIVE, SUITE 1007
City-St-Zip: LOS ANGELES, CA 90069

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 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: JERE LIFSHITZ ST 04/29/2004

Electronic Signature of Signing Officer or Director — Date