

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071377

FILED
Apr 04, 2005
Secretary of State

Entity Name: MARKI'S ANEW WEIGH FOR WOMEN, INC.

Current Principal Place of Business:

2280 SOUTH 3RD STREET
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

2280 SOUTH 3RD STREET
JACKSONVILLE BEACH, FL 32250 US

New Mailing Address:

FEI Number: 56-2372568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERS, KIMBERLY M OWNER
13047 WEXFORD HOLLOW RD N
JACKSONVILLE, FL 32224 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WALTERS, KIM
Address: 13047 WEXFORD HOLLOW ROAD N
City-St-Zip: JACKSONVILLE, FL 32224

Title: D () Delete
Name: ELLEDGE, MAURI
Address: 1 DOLPHIN BOULEVARD COURT
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WALTERS, KIMBERLY M
Address: 13047 WEXFORD HOLLOW ROAD N
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: D (X) Change () Addition
Name: ELLEDGE, MAURI
Address: 360 ST AUGUSTINE BLVD
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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: KIMBERLY M WALTERS

PRES

04/04/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date