

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088291

FILED
Feb 24, 2006
Secretary of State

Entity Name: WEIGHT LOSS PROS, INC.

Current Principal Place of Business:

3418 SE 17TH AVENUE
CAPE CORAL, FL 33904

New Principal Place of Business:

4940 SW 2ND PLACE
CAPE CORAL, FL 33914

Current Mailing Address:

3418 SE 17TH AVENUE
CAPE CORAL, FL 33904

New Mailing Address:

4940 SW 2ND PLACE
CAPE CORAL, FL 33914

FEI Number: 55-0842650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEXANDER, ERNEST WAYNE
3418 SE 17TH AVENUE
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

ALEXANDER, ERNEST W PRES.
4940 SW 2ND PLACE
CAPE CORAL, FL 33914 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: ERNEST WAYNE ALEXANDER

02/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALEXANDER, ERNEST WAYNE
Address: 3418 SE 17TH AVENUE
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALEXANDER, ERNEST W PRES.
Address: 3418 SE 17TH AVENUE
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ERNEST WAYNE ALEXANDER

PRES

02/24/2006

Electronic Signature of Signing Officer or Director

Date