

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088291

Entity Name: WEIGHT LOSS PROS, INC.

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

4940 SW 2ND PLACE
CAPE CORAL, FL 33914

New Principal Place of Business:

1729 SW 14TH STREET
CAPE CORAL, FL 33991

Current Mailing Address:

4940 SW 2ND PLACE
CAPE CORAL, FL 33914

New Mailing Address:

1729 SW 14TH STREET
CAPE CORAL, FL 33991

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 W PRES.
4940 SW 2ND PLACE
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

ALEXANDER, ERNEST W PRES.
1729 SW 14TH STREET
CAPE CORAL, FL 33991 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

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALEXANDER, ERNEST W PRES.
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: 1729 SW 14TH STREET
City-St-Zip: CAPE CORAL, FL 33991

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 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

MR.

04/30/2007

Electronic Signature of Signing Officer or Director

Date