

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000042525

FILED
Apr 06, 2011
Secretary of State

Entity Name: ALPHA WEIGHT AND WELLNESS MEDICAL CLINIC, PA

Current Principal Place of Business:

172 SOUTH SEMORAN BLVD
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

172 SOUTH SEMORAN BLVD
ORLANDO, FL 32807

New Mailing Address:

FEI Number: 81-0644179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLO, MD, FLORENCIO
2012 DUTCHESS LANE
WINTER PARK, FL 32792 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

OFFICERS AND DIRECTORS:

Title: DR
Name: ELLO, FLORENCIO MD
Address: 172 SOUTH SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32807

Title: MRS
Name: ELLO, REGINA
Address: 172 SOUTH SEMORAN BLVD
City-St-Zip: ORLANDO, FL 32807

I hereby 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 all other like empowered.

SIGNATURE: FLORENCIO ELLO

DR.

04/06/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date