

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000071635

Entity Name: CAL-CHECK DIET SYSTEMS, INC.

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

1729 WOODMERE DRIVE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

5016 ASTRAL STREET
JACKSONVILLE, FL 32205 US

Current Mailing Address:

1729 WOODMERE DRIVE
JACKSONVILLE, FL 32210 US

New Mailing Address:

5016 ASTRAL STREET
JACKSONVILLE, FL 32205 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, DAISY
5016 ASTRAL STREET
JACKSONVILLE, FL 32205 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: BROWN, DAISY
Address: 1729 WOODMERE DR.
City-St-Zip: JACKSONVILLE, FL 32210 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BROWN, DAISY
Address: 5016 ASTRAL STREET
City-St-Zip: JACKSONVILLE, FL 32205 US

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: DAISY BROWN

PRES

04/18/2006

Electronic Signature of Signing Officer or Director

Date