FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 JAN 31 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000082833 (2)

1. Corporation Name
ADVANTAGE WEIGHT CONTROL, INC.

Principal Place of Business	Mailing Address
11307 1111TH COURT N. LARGO FL 34640	11307 1111TH COURT N. LARGO FL 34640

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/09/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 850 Clearwater-Largo Rd,SW	26 850 Clearwater-Largo Rd,SW
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Largo, FL	City & State 28 Largo, FL
Zip / Country 24 34640-4470 / 25 USA	Zip / Country 29 34640-4470 / 30 USA

4. FEI Number: 59-3281466 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

TREVENA, JOHN H
11307 1111TH COURT N.
LARGO FL 34640

10. Name and Address of New Registered Agent

81 Name: John H. Trevena, Pres.
82 Street Address (P.O. Box Number is Not Acceptable): 850 Clearwater-Largo Rd., S.W.
83
84 City: Largo FL 85 Zip Code: 34640-4470

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] John H. Trevena, Pres. 01/17/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P/T/S/M	☒ Change ☐ Addition
NAME	TREVENA, JOHN H	12 NAME		
STREET ADDRESS	11307 1111TH COURT N.	13 STREET ADDRESS	850 Clearwater-Largo Rd., S.W.	
CITY-ST-ZIP	LARGO FL 34640	14 CITY-ST-ZIP	Largo, FL 34640-4470	
TITLE	D	21 TITLE	C/D	☒ Change ☐ Addition
NAME	FIREMAN, ALFRED E MD	22 NAME		
STREET ADDRESS	4625 EAST BAY DRIVE	23 STREET ADDRESS	850 Clearwater-Largo Rd., S.W.	
CITY-ST-ZIP	CLEARWATER FL 34624	24 CITY-ST-ZIP	Largo, FL 34640-4470	
TITLE		31 TITLE	V/D	☐ Change ☒ Addition
NAME		32 NAME	Edwin K. House, Jr., M.D.	
STREET ADDRESS		33 STREET ADDRESS	850 Clearwater-Largo Rd., S.W.	
CITY-ST-ZIP		34 CITY-ST-ZIP	Largo, FL 34640-4470	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] John H. Trevena, Pres. 01/17/95 (813) 559-8054
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR (Date) (Telephone Number)

0459978 FP