2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2010
Secretary of State

DOCUMENT# P95000095104

Entity Name: WEIGHT LOSS & FAMILY HEALTH CENTER, INC.

Current Principal Place of Business:

17011 PINES BLVD
PEMBROKE PINES, FL 33027

New Principal Place of Business:

Current Mailing Address:

17011 PINES BLVD
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 65-0627079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEVINSON, CATHERINE
17011 PINE BLVD
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

LEVINSON, CATHERINE
17011 PINES BLVD
PEMBROKE PINES, FL 33027 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: 04/15/2010
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P
Name: LEVINSON, CATHERINE
Address: 17011 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33027

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: CATHERINE LEVINSON P 04/15/2010
Electronic Signature of Signing Officer or Director — Date