2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2009
Secretary of State

DOCUMENT# P97000079972

Entity Name: AMERICAN HEALTH AND WEIGHT, INC.

Current Principal Place of Business:

10952 W. COLONIAL DR.
OCOEE, FL 34761

New Principal Place of Business:

10886 W COLONIAL DR
OCOEE, FL 34761

Current Mailing Address:

10952 W. COLONIAL DR.
OCOEE, FL 34761

New Mailing Address:

10886 W COLONIAL DR.
OCOEE, FL 34761

FEI Number: 59-3472872 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEAVELL, WENDY
10952 W. COLOINAL DR
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

LEAVELL, WENDY
10886 W. COLOINAL DR
OCOEE, FL 34761 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: 02/17/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEAVELL, WENDY
Address: 10952 W. COLONIAL DR.
City-St-Zip: OCOEE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEAVELL, WENDY
Address: 10886 W. COLONIAL DR.
City-St-Zip: OCOEE, FL 34761

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: WENDY LEAVELL P 02/17/2009
Electronic Signature of Signing Officer or Director — Date