## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000033437

Entity Name: WESTON MED, INC.

City-St-Zip:

WESTON, FL 33326

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
STE 4	DYAL PALM BI	_VD			
WESTON	l, FL 33326				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
17120 RO STE 4	DYAL PALM BI	_VD			
WESTON	l, FL 33326				
FEI Numbei	r: 65-0938091	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 4	HANOR DYAL PALM BI I, FL 33326 U				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	PVST ( CALLE, PHAN 17120 ROYA		Title: ( Name: Address:	) Change ( ) Addition	

City-St-Zip:

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: PHANOR CALLE **PVST** 04/16/2009