

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000069

FILED
Feb 29, 2012
Secretary of State

Entity Name: LIFE EXTENSION PHARMACY, INC.

Current Principal Place of Business:

1100 W. COMMERCIAL BLVD., SUITE #130
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

5990 NORTH FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33308

Current Mailing Address:

1100 W. COMMERCIAL BLVD, SUITE #130
FT. LAUDERDALE, FL 33309

New Mailing Address:

5990 NORTH FEDERAL HIGHWAY
FT. LAUDERDALE, FL 33308

FEI Number: 20-4006694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: D
Name: FALON, WILLIAM
Address: 3600 W. COMMERCIAL BLVD
City-St-Zip: LAUDERDALE, FL 33309

Title: PST
Name: MURRAY, JAMES D
Address: 3600 W. COMMERCIAL BLVD.
City-St-Zip: LAUDERDALE, FL 33309

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: JAMES D. MURRAY

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02/29/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date