## 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100586

Entity Name: AGELESS MEDISPA LLC

Apr 28, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1690 DUNLAWTON AVE. STE 110 1265 WEST GRANADA BLVD. PORT ORANGE, FL 32127

ORMOND BEACH, FL 32174

**Current Mailing Address: New Mailing Address:** 

1690 DUNLAWTON AVE. STE 110 1265 WEST GRANADA BLVD. PORT ORANGE, FL 32127

ORMOND BEACH, FL 32174

FEI Number: 06-1797657 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOLOMON, GEORGE SOLOMON, GEORGE 1690 DUNLAWTON AVE. STE 110 1265 WEST GRANADA BLVD. PORT ORANGE, FL 32127 ORMOND BEACH, FL 32174 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: 04/28/2011

> Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

SOLOMON, GEORGE Name: Address: 1265 WEST GRANADA BLVD. City-St-Zip: ORMOND BEACH, FL 32127

Title: MGR

Name: SOLOMON, RASHA Address: 1265 WEST GRANADA BLVD.

City-St-Zip: ORMOND BEACH, FL 32127

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: GEORGE SOLOMON **MGR** 04/28/2011