FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000057560**1. Corporation Name

ELECTROLYSIS FOR ATHLETES, INC.

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90067 029 ***150.00



						B)) ([]))	
Principal Place of Business Mailing Address							
12856 ARROWWOOD DRIVE 12856 ARROWWOOD PALM BEACH GARDENS FL 33418 PALM BEACH GARDE					DO NOT WRITE IN THIS SPACE		
•					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	ŀ	
2 Dringing D	lace of Business	2n Mailing Address			06/15/1998 4. FEI Number O Applied	For	
2. Principal Place of Business 2a. Mailing Address 2b. Principal Place of Business 2c. Mailing Address 2c. Principal Place of Business 2c. Principal Place of					65-0867371 Not Applied		
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 Addition		
22 Suite 104 27					5. Certificate of Status Desired		
City & State City & State City & State 28					6. Election Campaign Financing \$5.00 May I		
		28			Trust Fund Contribution Added to Fee	<u>'s</u>	
Zip 33409	Country Palm Beach	Zip	Country □		8. This corporation owes the current year intangible Personal Property Tax. No. 2015	_	
24 33409		29 30	'l , -		Personal Property Tax Yes No.	 -	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered Agent		
WILL	JAMS, JOY			, vanio			
2300 PALM BEACH LAKES BOULEVARD				Street A	Address (P.O. Box Number is Not Acceptable)	İ	
SUITE 104			83				
WEST PALM BEACH FL 33409			63	j		}	
			84	City	FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named co	corporation submits this statement for the purpose of changing its regist	tered	
office or n	egistered agent, or both, in the State of m familiar with and accept the obligation	Florida, Such change was auth ons of, Section 607,0505, Florida	orized by Statutes	the corpor	oration's board of directors. I hereby accept the appointment as register	ea	
	X //Mx /A/1/Vian	n1			2/18/19	- 1	
SIGNATURE	Signature, typed or minted name of registered agent a	and title if applicable. (NOTE: Re-	gistered Ager	t signature req	equired when reinstating) DATE		
12. /	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change	Addition	
NAME	WILLIAMS, JOY		1.2 NAME			- [
STREET ADDRESS	12856 ARROWWOOD DRIVE			ADDRESS		ĺ	
CITY-ST-ZIP	PALM BEACH GARDENS FL 334	18	1.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE		Change	Addition	
NAME			2.2 NAME			1	
STREET ADDRESS			2.3 STREE	ADDRESS			
CITY-ST-ZIP			2. 4 CITY- 9	T-ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change ☐	Addition	
NAME			3.2 NAME			l	
STREET ADDRESS			3.3 STREE	ADORESS		,	
CITY-ST-ZIP		i	3.4. CITY- S	T-ZIP		}	
TITLE		☐ DELETE	4.1 TITLE		. Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	ADDRESS		ļ	
CITY-ST-ZIP			4.4 CITY-S	T-ZIP			
TITLE		DELETE	51 TITLE		· Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	61TITLE		☐ Change ☐	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS		ļ	
CITY-ST-ZIP			6.4 CITY-S	T-ZIP	·	Ì	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I are 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 in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/19/99

561-471-9594 Daytime Phone # (11/98)