

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000074399

**Entity Name:** ANTI-AGING ASSOCIATES OF FLORIDA INC.

**Current Principal Place of Business:**

201 NW 82 AVE., SUITE 401  
PLANTATION, FL 33324

**Current Mailing Address:**

201 NW 82 AVE., SUITE 401  
PLANTATION, FL 33324

**FEI Number:** 20-1028579

**Certificate of Status Desired:** No

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

LYNN, BRIAN  
2 S UNIVERSITY DRIVE  
SUITE 215  
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	VTSD
Name	MORAN, GLENN K	Name	BATES, PAUL T
Address	201 NW 82 AVE., SUITE 401	Address	201 NW 82 AVE., SUITE 401
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PLANTATION FL 33324

*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:** PAUL BATES

**PRESIDENT**

**01/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date