

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000078180

**Entity Name:** LIFSITCH CORPORATION

**Current Principal Place of Business:**

10600 NW 37TH TERRACE  
MIAMI FL 33178  
MIAMI, FL 33178

**Current Mailing Address:**

10600 NW 37TH TERRACE  
MIAMI FL 33178  
MIAMI, FL 33178 US

**FEI Number:** 55-0870795

**Certificate of Status Desired:** No

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

ESCOBAR, CLARA S  
10600 NW 37TH TERRACE  
MIAMI, FL 33178 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  
Name ESCOBAR, CLARA SPD  
Address 11137 NW 67 ST  
City-State-Zip: MIAMI FL 33178

Title D  
Name GUTIERREZ, IVAN D  
Address 10600 NW 37 TERRACE  
City-State-Zip: MIAMI FL 33178

Title SD  
Name ESCOBAR, ENRIQUE SD  
Address 11137 NW 67 STREET  
City-State-Zip: MIAMI FL 33178

Title VP  
Name GUTIERREZ, SILVIA VP  
Address 10600 NW 37 TERRACE  
City-State-Zip: MIAMI FL 33178

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:** CLARA SUSANA ESCOBAR

**PRESIDENT**

**04/02/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date