

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000058007

**FILED  
Apr 08, 2016  
Secretary of State  
CC9854472851**

**Entity Name:** PALM BEACH ELITE SKIN & BODY WELLNESS, INC

**Current Principal Place of Business:**

2791 SW BEAR PAW TRAIL  
PALM CITY, FL 34990

**Current Mailing Address:**

2791 SW BEAR PAW TRAIL  
PALM CITY, FL 34990 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MAZZORANA, MICHELLE  
2791 SW BEAR PAW TRAIL  
PALM CITY, FL 34990 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            PRES  
Name            MAZZORANA, MICHELLE  
Address        2791 SW BEAR PAW TRAIL  
City-State-Zip: PALM CITY FL 34990

Title            SEC  
Name            MAZZORANA, CHRISTINE M  
Address        2791 SW BEAR PAW TRAIL  
City-State-Zip: PALM CITY FL 34990

Title            TREA  
Name            CODY, DONALD M II  
Address        2791 SW BEAR PAW TRAIL  
City-State-Zip: PALM CITY FL 34990

*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:** MICHELLE MAZZORANA

**PRESIDENT**

**04/08/2016**

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

\_\_\_\_\_  
Date