

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000024028

**Entity Name:** LIFE EXTENSION WELLNESS CENTER, INC

**Current Principal Place of Business:**

1418 S. FEDERAL HIGHWAY  
DANIA, FL 33004

**Current Mailing Address:**

1418 S. FEDERAL HIGHWAY  
DANIA, FL 33004

**FEI Number: 26-4473382**

**Certificate of Status Desired: No**

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

EDSON, LAURENCE J  
1489 W. PALMETTO PARK RD.  
STE. 425  
BOCA RATON, FL 33486 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 P  
Name SIMS, CAROL  
Address 1418 S FEDERAL HWY  
City-State-Zip: DANIA FL 33004

*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: CAROL SIMS** \_\_\_\_\_

P

03/14/2014

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date