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.

VICE PRESIDENT

SIGNATURE: DAVID HEXTER

Electronic Signature of Signing Officer/Director Detail

# 

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: ELITE REJUVENATION, INC.

# Current Principal Place of Business:

8401 LAKE WORTH ROAD 233 LAKE WORTH, FL 33467

# Current Mailing Address:

4650 SIENA CIRCLE WELLINGTON, FL 33414 US

# FEI Number: 45-1256293

# Name and Address of Current Registered Agent:

HEXTER, DAVID A 4650 SIENA CIRCLE WELLINGTON, FL 33414 US

IS

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

### Officer/Director Detail :

Р	Title	VP
HEXTER, VERONICA A	Name	HEXTER, DAVID A
4650 SIENA CIRCLE	Address	4650 SIENA CIRCLE
WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414
	P HEXTER, VERONICA A 4650 SIENA CIRCLE	P Title   HEXTER, VERONICA A Name   4650 SIENA CIRCLE Address

FILED Mar 23, 2014 Secretary of State CC2012690597

Certificate of Status Desired: No

Date

03/23/2014 Date