

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000030191

**Entity Name:** REJUVATRIM AESTHETICS INC

**Current Principal Place of Business:**

210 E INTENDENCIA ST  
PENSACOLA, FL 32502

**Current Mailing Address:**

210 E INTENDENCIA ST  
PENSACOLA, FL 32502

**FEI Number:** 81-2136065

**Certificate of Status Desired:** No

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

HICKEY, RAYMOND  
913 GULF BREEZE PKWY. #5  
GULF BREEZE, FL 32561 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            EDGE, ULRIKE  
Address        210 E INTENDENCIA ST  
City-State-Zip: PENSACOLA FL 32502

*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:** ULRIKE EDGE

**PRESIDENT**

**04/20/2017**

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

\_\_\_\_\_  
Date