2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H33786

Entity Name: REJUVENESCENCE, INC.

DELRAY BCH., FL

City-St-Zip:

FILED Apr 11, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2799 N.W. BOCA RATON BOULEVARD					
SUITE 115 BOCA RA	5 TON, FL 3343	1 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
634 EAGL	RA A. RICKETT E DRIVE BEACH, FL 33				
FEI Number:	: 59-2462923	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Age					
634 EAGLI	S, DEBRA A. E DRIVE BEACH, FL 33.	444 US			
	named entity s e of Florida.	submits this statement for the	e purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () RICKETTS, DE 634 EAGLE DR DELRAY BCH.,	IVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TS () RICKETTS, RO 634 EAGLE DR		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DEBRA A. RICKETTS P 04/11/2009