

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000096979

FILED
Aug 29, 2007
Secretary of State

Entity Name: LIFE REJUVENATION CENTER, LLC

Current Principal Place of Business:

4048 EVANS AVENUE, SUITE 306
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

4048 EVANS AVENUE, SUITE 306
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 20-5712901 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GREEN, BRUCE D
1380 ROYAL PALM SQUARE BLVD.
FORT MYERS, FL 33919 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

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR () Change (X) Addition
Name: CHAIKIN, LEWIS
Address: 4048 EVANS AVE #306
City-St-Zip: FT MYERS, FL 33901

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LEWIS CHAIKIN

MR

08/29/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date