2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48078

FILED Apr 29, 2008 Secretary of State

Entity Name: ELECTROLYSIS ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

7154 VIA GENOVA 6855 N.W. 74TH COURT DELRAY BEACH, FL 33446 PARKLAND, FL 33067

Current Mailing Address: New Mailing Address:

1609 S.W. 57TH AVENUE MIAMI, FL 33155

FEI Number: 65-0325228 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 Agent:

SAUGAR, CHINA A 1609 S.W. 57TH AVENUE MIAMI, FL 33155 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 REIMAN, ABY
 Name:
 CHALSON, ROSANNE

 Address:
 7154 VIA GENOVA
 Address:
 16440 DEL PALACIO COURT

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:
 DELRAY BEACH, FL 33484

Title: TD () Delete Title: TD (X) Change () Addition Name: ROSLYN, GOLDBERG Name: VOLK, LISA

 Address:
 7154 VIA GENOVA
 Address:
 6855 N.W. 74TH COURT

 City-St-Zip:
 DEL RAY BEACH, FL 33446
 City-St-Zip:
 PARKLAND, FL 33067

Title: VPD () Delete Title: VPD (X) Change () Addition

Name: GLENTON, SHEILA Name: SILBER, GOLDIE

 Address:
 7154 VIA GENOVA
 Address:
 4747 COLLINS AVENUE, #711

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:
 MIAMI BEACH, FL 33140

() Delete Title: SD Title: SD (X) Change () Addition SLOCOMBE, COLLEEN Name: Name: OLIVEIRA-BASORA, CRISTIANE Address: 7154 VIA GENOVA Address: 6170 S.W. 156TH COURT City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: MIAMI, FL 33193

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA VOLK TD 04/29/2008