

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000059329

Entity Name: ARIEL FOR LIFE, INC.

FILED  
Apr 15, 2009  
Secretary of State

## Current Principal Place of Business:

9541 AEGEAN DRIVE  
BOCA RATON, FL 33496

## New Principal Place of Business:

381 NE 5TH AVENUE  
DELRAY BEACH, FL 33483

## Current Mailing Address:

9541 AEGEAN DRIVE  
BOCA RATON, FL 33496

## New Mailing Address:

381 NE 5TH AVENUE  
DELRAY BEACH, FL 33483

FEI Number: 41-2044144

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORMA, ELIAS  
9541 AEGEAN DR  
BOCA RATON, FL 33496 US

## Name and Address of New Registered Agent:

FORMA, ELIAS  
381 NE 5TH AVENUE  
DELRAY BEACH, FL 33483 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: ELIAS FORMA

04/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FORMA, ELIAS  
Address: 9541 AEGEAN DRIVE  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FORMA, ELIAS  
Address: 381 NE 5TH AVENUE  
City-St-Zip: DELRAY BEACH, FL 33483

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: ELIAS FORMA

D

04/15/2009

Electronic Signature of Signing Officer or Director

Date