

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000066816

**FILED**  
**Feb 05, 2009**  
**Secretary of State**

**Entity Name:** PALM BEACH LONGEVITY AND RESEARCH CENTER, INC.

**Current Principal Place of Business:**

10131 FOREST HILL BLVD  
SUITE 230  
WELLINGTON, FL 33414 US

**Current Mailing Address:**

10131 FOREST HILL BLVD  
SUITE 230  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

440 STATE ROAD 7  
SUITE 103  
ROYAL PALM BEACH, FL 33411 US

**New Mailing Address:**

10131 W FOREST HILL BLVD  
SUITE 230  
WELLINGTON, FL 33414 US

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

DAVIS, RICHARD T  
901 N. OLIVE AVENUE  
WEST PALM BEACH, FL 33401 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MONTIJO, HARVEY M.D.  
Address: 10131 FOREST HILL BLVD., SUITE 230  
City-St-Zip: WELLINGTON, FL 33401 US

Title: D ( ) Delete  
Name: GOLDMAN, ROBERT M M.D.  
Address: 301 YAMATO RD., SUITE 2199  
City-St-Zip: BOCA RATON, FL 33431 US

Title: D (X) Delete  
Name: KLATZ, RONALD M M.D.  
Address: 301 YAMATO RD., SUITE 2199  
City-St-Zip: BOCA RATON, FL 33431 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DR (X) Change ( ) Addition  
Name: MONTIJO, HARVEY M.D.  
Address: 10131 W FOREST HILL BLVD, SUITE 230  
City-St-Zip: WELLINGTON, FL 33414 US

Title: DR (X) Change ( ) Addition  
Name: GHEN, MITCHELL D.O.  
Address: 10131 W FOREST HILL BLVD, SUITE 230  
City-St-Zip: WELLINGTON, FL 33414 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: HARVEY MONTIJO

CEO

02/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date