

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000013182

Entity Name: ANTI-AGING PRESS, INC.

FILED  
Mar 26, 2009  
Secretary of State

**Current Principal Place of Business:**

4185 PAMONA AVENUE  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

4185 PAMONA AVENUE  
COCONUT GROVE, FL 33133

**New Mailing Address:**

FEI Number: 65-0387724

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, CARL  
3423 N HIATUS RD  
FORT LAUDERDALE, FL 33351 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: P ( ) Delete  
Name: BUSCH, JULIA  
Address: 4185 PAMONA AVENUE  
City-St-Zip: COCONUT GROVE, FL 33133

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

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: JULIA BUSCH

PRES

03/26/2009

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

\_\_\_\_\_  
Date