

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000087258 (5)

1. Corporation Name

FOREVER YOUNG, INCORPORATED



Principal Place of Business

1630 BUTTONBUSH CIRCLE  
PALM CITY FL 34990

Mailing Address

1630 BUTTONBUSH CIRCLE  
PALM CITY FL 34990-8090

3. Date Incorporated or Qualified

10/21/1996

3a. Date of Last Report

4. FEI Number

59-3405698

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUSHEY, CARI  
1630 BUTTONBUSH CIRCLE  
PALM CITY FL 34990

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME BUSHEY, CARI  
STREET ADDRESS 1630 BUTTONBUSH CIRCLE  
CITY- ST- ZIP PALM CITY FL 34990

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

TITLE ☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

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7.1 TITLE

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10.1 TITLE

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23.4 CITY- ST- ZIP

TITLE ☐ DELETE

24.1 TITLE

24.2 NAME

24.3 STREET ADDRESS

24.4 CITY- ST- ZIP

TITLE ☐ DELETE

25.1 TITLE

25.2 NAME

25.3 STREET ADDRESS

25.4 CITY- ST- ZIP

SIGNATURE:

X CARI BUSHEY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-97 (561) 220-0220  
Date Daytime Phone #

CR2E034 (9/96)