

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000063970

Entity Name: OLYMPUS REJUVENATION CENTER, PA

Current Principal Place of Business:

8091 NW 12TH STREET UNIT H
MARGATE, FL 33063

Current Mailing Address:

8091 NW 12TH STREET UNIT H
MARGATE, FL 33063 US

FEI Number: 47-1509591

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTANEDA, CARLOS R
8401 LAKE WORTH ROAD, SUITE 227
LAKE WORTH, FL 33467 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

Officer/Director Detail :

Title PSD
Name BECKER, SAMUEL M
Address 8091 NW 12TH STREET UNIT H
City-State-Zip: MARGATE FL 33063

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL BECKER

PRESIDENT

03/02/2016

Electronic Signature of Signing Officer/Director Detail

Date