

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000007082

**FILED  
Feb 06, 2015  
Secretary of State  
CC7552530718**

**Entity Name:** LIFE STEM CELL INSTITUTE INC.

**Current Principal Place of Business:**

1720 S OCEAN BLVD  
MANALAPAN, FL 33462

**Current Mailing Address:**

1720 S. OCEAN BLVD  
MANALAPAN, FL 33462 US

**FEI Number: 20-3715094**

**Certificate of Status Desired: No**

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

POPE, LOIS B  
1720 S OCEAN BLVD  
MANALAPAN, FL 33462 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            CPT  
Name            POPE, LOIS B  
Address        6274 LINTON BOULEVARD, SUITE 103  
City-State-Zip: DELRAY BEACH FL 33484

Title            S  
Name            MILLER, ROBERT C  
Address        60 EAST 42ND STREET  
City-State-Zip: NEW YORK NY 10165

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: LOIS POPE**

**PRESIDENT**

**02/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date