

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000093526

**Entity Name:** HEALTHY LIFE GROUP, INC.

**Current Principal Place of Business:**

12905 CHERRY ROAD  
NORTH MIAMI, FL 33181-2307

**Current Mailing Address:**

382 NE 191ST STREET  
UNIT 25454  
MIAMI, FL 33179 US

**FEI Number:** 46-4159093

**Certificate of Status Desired:** No

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

ROBREDO, JUAN J  
12905 CHERRY ROAD  
NORTH MIAMI, FL 33181-2307 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 P,S  
Name ROBREDO, JUAN J  
Address 382 NE 191ST STREET, UNIT 25454  
City-State-Zip: MIAMI FL 33179

Title S  
Name ROBREDO, JUAN J  
Address 382 NE 191ST STREET, UNIT 25454  
City-State-Zip: MIAMI FL 33179

*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:** JUAN ROBREDO

**CEO**

**01/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date