

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018785

FILED
Jan 25, 2011
Secretary of State

Entity Name: PAPHIDES-CUADRAS COSMETICS, INC.

Current Principal Place of Business:

183 SW BASCOM NORRIS DR.
107
LAKE CITY, FL 32025

New Principal Place of Business:

Current Mailing Address:

183 SW BASCOM NORRIS DR
LAKE CITY, FL 32025

New Mailing Address:

FEI Number: 13-4273236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUADRAS, MICHELE P
246 SW MELBA GLEN
LAKE CITY, FL 32024 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

OFFICERS AND DIRECTORS:

Title: PD
Name: CUADRAS, MICHELE P
Address: 246 SW. MELBA GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: VD
Name: PAPHIDES, LAURA T
Address: 285 SW DRAGONFLY COURT
City-St-Zip: LAKE CITY, FL 32024

Title: T
Name: CUADRAS, CHRIS M
Address: 246 SW MELBA GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: S
Name: PAPHIDES, BRIAN M DDS
Address: 285 SW DRAGONFLY COURT
City-St-Zip: LAKE CITY, FL 32024

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: MICHELE P CUADRAS

PRES

01/25/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date