

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000135466

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: SKIN TRANSFORMATIONS, INC.

## Current Principal Place of Business:

1500 WESTON ROAD  
SUITE 208  
WESTON, FL 33326 US

## New Principal Place of Business:

2893 EXECUTIVE PARK DR.  
SUITE 107  
WESTON, FL 33331 US

## Current Mailing Address:

1500 WESTON ROAD  
SUITE 208  
WESTON, FL 33326 US

## New Mailing Address:

2893 EXECUTIVE PARK DR.  
SUITE 107  
WESTON, FL 33331 US

FEI Number: 26-1644346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SALAZAR, DORA  
1500 WESTON ROAD  
SUITE 208  
WESTON, FL 33326 US

## Name and Address of New Registered Agent:

SALAZAR, DORA  
2893 EXECUTIVE PARK DR.  
SUITE 107  
WESTON, FL 33331 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: DORA SALAZAR

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: SALAZAR, DORA  
Address: 1500 WESTON ROAD, SUITE 208  
City-St-Zip: WESTON, FL 33326 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: SALAZAR, DORA  
Address: 4800 E. ROUNDTABLE RD  
City-St-Zip: DAVIE, FL 33331 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DORA SALAZAR

DPST

04/17/2009

Electronic Signature of Signing Officer or Director

Date