

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 20, 2008  
Secretary of State**

DOCUMENT# P94000031821

Entity Name: IMAGOS INSTITUTE OF PLASTIC SURGERY, INC.

**Current Principal Place of Business:**

9955 N KENDALL DR  
2ND FLOOR  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

9955 N KENDALL DR  
2ND FLOOR  
MIAMI, FL 33176 US

**New Mailing Address:**

FEI Number: 65-0484683      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PEREZ-GURRI, JOSE A.  
9955 N KENDALL DR  
2ND FLOOR  
MIAMI, FL 33176 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: PEREZ-GURRI, JOSE A.  
Address: 9955 N KENDALL DR, 2ND FLOOR  
City-St-Zip: MIAMI, FL 33176

Title: VPT ( ) Delete  
Name: PEREZ-GURRI, KATHY  
Address: 9955 N KENDALL DR, 2ND FLOOR  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KATHY PEREZ-GURRI

VPT

03/20/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date