

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000080960

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** CUTIS, SILHOUETTES COSMETIC SURGERY & SKIN CARE, CORP.

**Current Principal Place of Business:**

400 ARTHUR GODFREY ROAD  
SUITE #512  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

3400 CORAL WAY  
600  
MIAMI, FL 331453053

**New Mailing Address:**

3128 CORAL WAY  
MIAMI, FL 331453210

**FEI Number:** 65-0535570

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VALLEJO, OLGA C  
250 - 174TH STREET  
APT. 203  
MIAMI BEACH, FL 33160 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: PD ( ) Delete  
Name: SOMERS, PETER C  
Address: 400 ARTHUR GODFREY RD SUITE 512  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VSD ( ) Delete  
Name: VALLEJO, OLGA C  
Address: 250 - 174TH STREET, APT. 203  
City-St-Zip: MIAMI BEACH, FL 33160

**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: OLGA VALLEJO

VSD

04/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date