2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000116577

Entity Name: SENOR BODY SHOP, CORP.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
4295 E 10 HIALEAH,	TH LANE FL 33013				
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
3200 SW 9 MIAMI, FL	91 AVE 33165				
FEI Number	: 65-1158097	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	New Registered Agent:	
SOLER, E 3200 SW 9 MIAMI, FL	91 AVE				
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (SOLER, ENRIC 3200 SW 91 A' MIAMI, FL 331	V E	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (ARMENTORO, 3200 SW 91 A' MIAMI, FL 331	VE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S (SOLER, VILMA 3200 SW 91 A' MIAMI, FL 331	V E	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ENRIQUE SOLER P 01/13/2009