

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000033184

**Entity Name:** FACIAL OASIS, INC.

**Current Principal Place of Business:**

550 BILTMORE WAY  
113  
CORAL GABLES, FL 33134

**Current Mailing Address:**

550 BILTMORE WAY  
113  
CORAL GABLES, FL 33134 US

**FEI Number:** 26-4700839

**Certificate of Status Desired:** No

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

ACCOUNTAX OFFICE SERVICES, CORP  
7590 NW 186 STREET  
206-A  
MIAMI, FL 33015 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CANCINO, MAYRA R  
Address 8615 NW 189 LN  
3707  
City-State-Zip: MIAMI FL 33015

*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:** MAYRA R CANCINO

P

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date