

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000042251

Entity Name: STEINER RESORT SPAS (NORTH CAROLINA), INC.**Current Principal Place of Business:**770 SOUTH DIXIE HIGHWAY
SUITE 200
CORAL GABLES, FL 33146**Current Mailing Address:**770 SOUTH DIXIE HIGHWAY
SUITE 200
CORAL GABLES, FL 33146**FEI Number:** 38-3816287**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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:** MAUREEN CATHELL

04/11/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** EXECUTIVE VICE PRESIDENT, CFO,
DIRECTOR**Name** LAZARUS, STEPHEN**Address** 770 SOUTH DIXIE HIGHWAY, SUITE
200**City-State-Zip:** CORAL GABLES FL 33146**Title** ASSISTANT SECRETARY**Name** FYODOROVA, INGA A**Address** 770 SOUTH DIXIE HIGHWAY, SUITE
200**City-State-Zip:** CORAL GABLES FL 33146**Title** PRESIDENT**Name** PINE, BRUCE**Address** 770 SOUTH DIXIE HIGHWAY
SUITE 200**City-State-Zip:** CORAL GABLES FL 33146**Title** SECRETARY, GENERAL COUNSEL,
EVP, DIRECTOR**Name** BOEHM, ROBERT C**Address** 770 SOUTH DIXIE HIGHWAY, SUITE
200**City-State-Zip:** CORAL GABLES FL 33146**Title** VP OF TAXATION**Name** FERNANDEZ, JACKIE**Address** 770 SOUTH DIXIE HIGHWAY
SUITE 200**City-State-Zip:** CORAL GABLES FL 33146

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: ROBERT C. BOEHM

SECRETARY

04/11/2017

Electronic Signature of Signing Officer/Director Detail

Date