

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000034304

**Entity Name:** CHRYSALIS COSMETIC SPA, INC.

**Current Principal Place of Business:**

3990 WEST FLAGLER STREET  
103  
MIAMI, FL 33134-1644

**Current Mailing Address:**

3990 WEST FLAGLER STREET  
103  
MIAMI, FL 33134-1644 US

**FEI Number:** 46-2579763

**Certificate of Status Desired:** Yes

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

OBESO, FERNANDO J SR  
3990 WEST FLAGLER STREET  
103  
MIAMI, FL 33134-1644 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 PD  
Name HABIF, JOSEFINA B SR  
Address 3990 WEST FLAGLER STREET-SUITE  
#103  
City-State-Zip: MIAMI FL 33134-1644

Title VP/T  
Name OBESO, FERNANDO J SR  
Address 3990 WEST FLAGLER STREET-SUITE  
#103  
City-State-Zip: MIAMI FL 33134-1644

Title S/D  
Name PALACIOS, MARIA CRISTINA SR  
Address 3990 WEST FLAGLER STREET-SUITE  
#103  
City-State-Zip: MIAMI FL 33134-1644

*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:** FERNANDO J. OBESO

**VICEPRESIDENT/TREASURER** 01/31/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date