

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 20, 2007 8:00 am**  
**Secretary of State**

02-20-2007 90052 007 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |                                                                                                   |                                                                                        |                                                                                                        |  |
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| DOCUMENT # F05000002247                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                               |                                                                                                   |                                                                                        |                       |  |
| <b>1. Entity Name</b><br>VIBRADERM, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                               |                                                                                                   |                                                                                        |                                                                                                        |  |
| <b>Principal Place of Business</b><br>2100 N. HIGHWAY 360<br>SUITE 1502<br>GRAND PRAIRIE, TX 75050                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                               |                                                                                                   | <b>Mailing Address</b><br>2100 N. HIGHWAY 360<br>SUITE 1502<br>GRAND PRAIRIE, TX 75050 |                                                                                                        |  |
| <b>2. Principal Place of Business - No P.O. Box #</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                               | <b>3. Mailing Address</b>                                                                         |                                                                                        |                                                                                                        |  |
| Suite, Apt. #, etc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                               | Suite, Apt. #, etc                                                                                |                                                                                        |                                                                                                        |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                               | City & State                                                                                      |                                                                                        |                                                                                                        |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Country                                                                       | Zip                                                                                               | Country                                                                                | <b>4. FEI Number</b><br>47-0866651                                                                     |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                               |                                                                                                   |                                                                                        | <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |
| <b>6. Name and Address of Current Registered Agent</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                               |                                                                                                   | <b>7. Name and Address of New Registered Agent</b>                                     |                                                                                                        |  |
| CORPORATE CREATIONS NETWORK, INC.<br>11380 PROSPERITY FARMS ROAD #221E<br>PALM BEACH GARDENS, FL 33410                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                               |                                                                                                   | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code      |                                                                                                        |  |
| <b>8. 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. I am familiar with and accept the obligations of registered agent.</b>                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                               |                                                                                                   |                                                                                        |                                                                                                        |  |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                               |                                                                                                   |                                                                                        |                                                                                                        |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2007 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                               | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                                        |                                                                                                        |  |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                               |                                                                                                   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                           |                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | PD<br>OSBORN, TERRY W<br>4615 WOODED ACRES DRIVE<br>ARLINGTON, TX 76016       | <input type="checkbox"/> Delete                                                                   |                                                                                        |                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SD<br>SKINNER, JOHN F<br>2013 CROCKETT COURT<br>IRVING, TX 75038              | <input type="checkbox"/> Delete                                                                   |                                                                                        |                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | D<br>CARROLL, TIMOTHY<br>3116C MONTGOMERY RD S, # 166<br>MAINEVILLE, OH 45039 | <input checked="" type="checkbox"/> Delete                                                        |                                                                                        |                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | VP<br>MAYBERRY, BARI<br>78 ASHLYN GROVE<br>THE WOODLANDS, TX 77382            | <input type="checkbox"/> Delete                                                                   |                                                                                        |                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                               | <input type="checkbox"/> Delete                                                                   |                                                                                        |                                                                                                        |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                               | <input type="checkbox"/> Delete                                                                   |                                                                                        |                                                                                                        |  |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b> |                                                                               |                                                                                                   |                                                                                        |                                                                                                        |  |
| <b>SIGNATURE:</b> _____<br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                               |                                                                                                   | 2-16-07 9726061301<br>Date Daytime Phone #                                             |                                                                                                        |  |