

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Modham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F13359

(7)

1. Corporation Name

MAXIMA SKIN CARE CENTERS, INC.



Principal Place of Business

3307 N.E. 33RD STREET
FT LAUDERDALE FL 33308

Mailing Address

3307 N.E. 33RD STREET
FT LAUDERDALE FL 33308

2. Principal Place of Business

2a. Mailing Address

21 2624 NE 26th ST.

26 2624 NE 26th ST.

State Apt. #, etc.

State Apt. #, etc.

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City & State

City & State

23 LIGHTHOUSE POINT, FL

28 LIGHTHOUSE POINT, FL

Zip

Zip

Country

Country

24 33064

25 U.S.A.

29 33064

30 U.S.A.

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
12/31/1980

3a. Date of Last Report
09/26/1995

4. FEI Number
59-2048770

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

SOMMERS, BERNADETTE
3307 NE 33RD STREET
FT LAUDERDALE FL 33308

81 Name
BERNADETTE SOMMERS

82 Street Address (P.O. Box Number is Not Acceptable)
2624 NE 26th ST

83

84 City
LIGHTHOUSE POINT, FL

85 Zip Code
33064

11. Pursuant to the provisions of Sections 607.0507 and 607.1502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to execute this statement

Signature of the person who is authorized to execute this statement

DATE

12. OFFICERS AND DIRECTORS

1. NAME
PD
SOMMERS, BERNADETTE
2. STREET ADDRESS
3307 N.E. 33RD STREET
3. CITY, STATE, ZIP
FT. LAUDERDALE FL 33308
4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY, STATE, ZIP
8. TITLE
9. NAME
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99. CITY, STATE, ZIP
100. TITLE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

1. NAME
2. NAME
3. STREET ADDRESS
4. CITY, STATE, ZIP
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99. STREET ADDRESS
100. CITY, STATE, ZIP

14. I hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. If 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

Bernadette Sommers
BERNADETTE SOMMERS

2/25/96 954-781-6004

CR2E034 (12/95)