


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90424 046 ***150.00

DOCUMENT # K20424		
1. Entity Name SKINSATIONAL BODY, INC.		

Principal Place of Business 4308 75TH STREET, WEST BRADENTON, FL 34209 US	Mailing Address 4308 75TH STREET, WEST BRADENTON, FL 34209 US
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94064055



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01222004 Chg-P CR2E034 (10/03)

4. FEI Number 65-0048176	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MENENDEZ, MARY E 520 KEY ROYALE DRIVE HOLMES BEACH, FL 34217 <i>4101 GOLF DR</i>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		State FL Zip Code	

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PTD <input type="checkbox"/> Delete	TITLE	PTD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	PTD <input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	PTD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENENDEZ, MARY E	NAME	MENENDEZ, MARY E.	NAME	MENENDEZ, MARY E.	NAME	MENENDEZ, MARY E.
STREET ADDRESS	520 KEY ROYALE DRIVE <i>4101 GOLF DR</i>	STREET ADDRESS	520 Key Royale Drive <i>4101 GOLF DR</i>	STREET ADDRESS	520 Key Royale Drive <i>4101 GOLF DR</i>	STREET ADDRESS	520 Key Royale Drive <i>4101 GOLF DR</i>
CITY-ST-ZIP	HOLMES BCH, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: *Mary E. Menendez* **4-22-04 941-792-3302**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #