2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# L04000023965

Entity Name: PERFECT SKIN AND BODY CARE, LLC

Current Principal Place of Business:

312 S WASHINGTON BLVD
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

312 S WASHINGTON BLVD
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-0960650 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DUARTE, NESTOR R
2702 OAKTOU CT
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

DUARTE, NESTOR R
2702 OAKTON CT
SARASOTA, FL 34233 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: 05/01/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete
Name: DUARTE, MIRIAM L
Address: 5702 OAKTOU CT
City-St-Zip: SARASOTA, FL 34232

Title: MGR ( ) Delete
Name: DUARTE, NESTOR R
Address: 5702 OAKTOUR CT
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition
Name: DUARTE, MIRIAM L
Address: 5702 OAKTON CT
City-St-Zip: SARASOTA, FL 34232

Title: MGR (X) Change ( ) Addition
Name: DUARTE, NESTOR R
Address: 5702 OAKTON CT
City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MIRIAMDUARTE OWNE 05/01/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date