2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 12, 2008 8:00 am
Secretary of State
05-07-2008 90016 050 ***138.75

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DOCUMENT # L04000075364

1. Entity Name
COSMETIC BOOTCAMP, LLC.

Principal Place of Business	Mailing Address
1500 N. DIXIE HWY SUITE 305 WEST PAL BEACH, FL 33410	1500 N. DIXIE HWY SUITE 305 WEST PAL BEACH, FL 33410

30009213

DO NOT WRITE IN THIS SPACE

04182008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
20-3266154

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SCHWARTZ, PHILIP L ESQ.
2000 GLADES ROAD
SUITE 208
BOCA RATON, FL 33431

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BEER, KENNETH M.D.
STREET ADDRESS	1500 N. DIXIE HWY, STE 305
CITY-ST-ZIP	WEST PALM BEACH, FL 33410
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. 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 is true and accurate and that my 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: _____ 6-5-08 561-655-9055
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #