

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000065541

FILED
Feb 26, 2006
Secretary of State

Entity Name: PERFEKTA DERMATOLOGICA, LLC

Current Principal Place of Business:

C/O 7000 W. PALMETTO PARK ROAD
SUITE 310
BOCA RATON, FL 33433 US

New Principal Place of Business:

18990 SE COUNTY LINE RD
TEQUESTA, FL 33469 US

Current Mailing Address:

C/O 7000 W. PALMETTO PARK ROAD
SUITE 310
BOCA RATON, FL 33433 US

New Mailing Address:

18990 SE COUNTY LINE RD
TEQUESTA, FL 33469 US

FEI Number: 20-3109184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, STUART R ESQ.
7000 W. PALMETTO PARK ROAD
SUITE 310
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

HILLMANN, ELISE C
18990 SE COUNTY LINE RD
TEQUESTA, FL 33469 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: ELISE C. HILLMANN

02/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: DR. () Change (X) Addition
Name: HILLMANN, ELISE C
Address: 18990 SE COUNTY LINE RD
City-St-Zip: TEQUESTA, FL 33469 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ELISE C. HILLMANN

DR.

02/26/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date