

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000041127

FILED  
Apr 01, 2008  
Secretary of State

Entity Name: AESTHETIC WOMEN'S INSTITUTE, LLC

**Current Principal Place of Business:**

6280 SUNSET DRIVE  
SUITE #502  
SOUTH MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

6280 SUNSET DRIVE  
SUITE #502  
SOUTH MIAMI, FL 33143

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BSPA CORPORATE SERVICES, INC.  
350 E. LAS OLAS BLVD.  
SUITE 1000  
FT. LAUDERDALE, FL 33301 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: POLIAKOFF, STEVEN R  
Address: 6280 SUNSET DRIVE SUITE 502  
City-St-Zip: MIAMI, FL 33143

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: STEVEN R POLIAKOFF PRE 04/01/2008

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