

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000102988

FILED
Apr 08, 2009
Secretary of State

Entity Name: GLOBAL AESTHETIC CENTER L.L.C.

Current Principal Place of Business:

1394 CORAL WAY
MIAMI, FL 33145

New Principal Place of Business:

Current Mailing Address:

1394 CORAL WAY
MIAMI, FL 33145

New Mailing Address:

FEI Number: 26-3676566

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLATE JOSEPH,
454 NW 22 AVE. STE 209
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

VILLATE JOSEPH
454 NW 22 AVE. STE 209
MIAMI, FL 33125 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: JOSEPH VILLATE

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GARCIA, ANGEL M
Address: 1394 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: MGR () Delete
Name: GARCIA, LOURDES M
Address: 1394 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: MGR () Delete
Name: LANDRON, JUAN R
Address: 1394 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: MGR () Delete
Name: LANDRON, EVA
Address: 1394 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: MGR () Delete
Name: GARCIA SALADIN LANDR, ANGEL R
Address: 1394 CORAL WAY
City-St-Zip: MIAMI, FL 33145

Title: MGR () Delete
Name: GARCIA-SALADIN LANDR, MARGARITA
Address: 1394 CORAL WAY
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANGEL R GARCIA

MGR

04/08/2009

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