# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 30, 2011**
**Secretary of State**

DOCUMENT# L09000109969

**Entity Name:** PHYSICIANS AESTHETIC SERVICES, LLC

**Current Principal Place of Business:**

1326 MALABAR ROAD SE
SUITE 5
PALM BAY, FL 32907

**New Principal Place of Business:**

**Current Mailing Address:**

1326 MALABAR ROAD SE
SUITE 5
PALM BAY, FL 32907

**New Mailing Address:**

**FEI Number: 20-3905449** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GARCIA, JOVEN
100 RIALTO PLACE
SUITE 757
MELBOURNE, FL 32901 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: MGR
Name: GARCIA, CHARMAINE
Address: 1326 MALABAR RD SE SUITE 5
City-St-Zip: PALM BAY, FL 32907

I hereby 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 Statues.

SIGNATURE: CHARMAINE GARCIA MGR 04/30/2011

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