

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 08, 2011
Secretary of State

Entity Name: INTERNATIONAL AESTHETICS & LASER ASSOCIATION, INC.

Current Principal Place of Business:

4830 W. KENNEDY BOULEVARD
SUITE 440
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

4830 W. KENNEDY BOULEVARD
SUITE 440
TAMPA, FL 33609

New Mailing Address:

FEI Number: 26-3346606 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STROTHMAN, NICOLE
4830 W. KENNEDY BOULEVARD
SUITE 440
TAMPA, FL 33609 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

OFFICERS AND DIRECTORS:

Title: P/T
Name: STROTHMAN, NICOLE
Address: 4830 W. KENNEDY BLVD., SUITE 440
City-St-Zip: TAMPA, FL 33609 US

Title: D
Name: PITT, JOE
Address: 10710 SIKES PLACE, SUITE 120
City-St-Zip: CHARLOTTE, NC 28277 US

Title: VP
Name: BLOCH, RYAN
Address: 555 WASHINGTON AVE., SUITE 101
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: D
Name: KARAVOLAS, CHRIS
Address: 38 E. 57TH ST., 3RD FL
City-St-Zip: NEW YORK, NY 10022 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICOLE STROTHMAN

P/T

03/08/2011

Electronic Signature of Signing Officer or Director

Date