

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007475

FILED
Mar 22, 2006
Secretary of State

Entity Name: THE BODY IMAGE LASER INSTITUTE, P.A.

Current Principal Place of Business:

13905 CARROLLWOOD VILLAGE RUN
TAMPA, FL 33618

New Principal Place of Business:

2801 S. MACDILL AVENUE
TAMPA, FL 33629

Current Mailing Address:

13905 CARROLLWOOD VILLAGE RUN
TAMPA, FL 33618

New Mailing Address:

2801 S. MACDILL AVENUE
TAMPA, FL 33629

FEI Number: 59-3621620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, JAY J M.D.
13905 CARROLLWOOD VILLAGE RUN
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

GARCIA, JAY J M.D.
2801 S. MACDILL AVENUE
TAMPA, FL 33629 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: JAY J. GARCIA

03/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GARCIA, JAY J M.D.
Address: 16406 ZURRAQUIN DE AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAY J. GARCIA

PRES

03/22/2006

Electronic Signature of Signing Officer or Director

Date