

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064739

FILED
Apr 28, 2006
Secretary of State

Entity Name: COSMETIC VEIN CENTER OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

9090 SW 87TH CT
SUITE 200
MIAMI, FL 33176

New Principal Place of Business:

1501 S MIAMI AVE
MIAMI, FL 33129

Current Mailing Address:

9090 SW 87TH CT
SUITE 200
MIAMI, FL 33176

New Mailing Address:

PO BOX 1365
KEY BISCAYNE, FL 33149

FEI Number: 65-1116523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALMEIDA, JOSE I
230 HAMPTON LANE
KEY BISCAYNE, FL 33149 US

Name and Address of New Registered Agent:

ALMEIDA, JOSE I
PO BOX 1365
KEY BISCAYNE, FL 33149 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:

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALMEIDA, JOSE I
Address: 9090 SW 87TH CT
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALMEIDA, JOSE I
Address: PO BOX 1365
City-St-Zip: KEY BISCAYNE, FL 33149

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: JOSE ALMEIDA

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date