

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000063439

FILED
Apr 30, 2004
Secretary of State

Entity Name: DERMALIFE ENTERPRISES, INC.

Current Principal Place of Business:

822 CAMARGO WAY
SUITE 302
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

P.O. BOX 160114
ALTAMONTE SPRINGS, FL 32716

New Principal Place of Business:

425 SUNLAKE CIRCLE
SUITE 313
LAKE MARY, FL 32746

New Mailing Address:

FEI Number: 35-2170815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, ALEXANDER E
822 CAMARGO WAY
SUITE 302
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

GONZALEZ, ALEXANDER E
425 SUNLAKE CIRCLE
SUITE 313
LAKE MARY, FL 32746 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: ALEXANDER E. GONZALEZ

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GONZALEZ, ALEXANDER E
Address: 822 CAMARGO WAY #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: S () Delete
Name: PASTOR, EDITH
Address: 822 CAMARGO WAY #302
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, ALEXANDER E
Address: 425 SUNLAKE CIRCLE #313
City-St-Zip: LAKE MARY, FL 32746

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 Section 119.07(3)(i), 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: ALEXANDER E. GONZALEZ

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date