## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000063439

Entity Name: DERMALIFE ENTERPRISES, INC

FILED May 11, 2005 Secretary of State

Entity Na	IME: DERMAL	IFE ENTERPRISES, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
SUITE 313	AKE CIRCLE 3 RY, FL 32746				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX ALTAMON	.160114 NTE SPRINGS	, FL 32716			
FEI Number	r: 35-2170815	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
425 SUNL SUITE 31: LAKE MAI	RY, FL 32746 e named entity e of Florida.	US	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATO		nic Signature of Registered Ag	ent	 Date	
Election Ca		03(2)(b), F.S., the corporation did no g Trust Fund Contribution(). ETORS:	•	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GONZALEZ, A 425 SUNLAKE	CIRCLE #313	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PASTOR, EDIT 822 CAMARGO		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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 PRES 05/11/2005