2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080763

16342 SW 53 TERRACE

MIAMI, FL 33185

Address:

City-St-Zip:

Entity Name: DERMATONUS, INC.

FILED Apr 30, 2008 Secretary of State

Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
9655 S. DIX SUITE #114 MIAMI, FL	4			16342 SW 53 TERRACE MIAMI, FL 33185 US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
9655 S. DIXIE HWY SUITE #114 MIAMI, FL 33156 US				16342 SW 53 TERRACE MIAMI, FL 33185 US	
FEI Number:	55-0789339	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:	
601 SW 57 MIAMI, FL	TH AVENUE S 33144 US		urnose of changing its registere	d office or registered agent, or both,	
in the State		abilitis tills statement for the p	urpose of changing its registered	d office of registered agent, or both,	
SIGNATUR	RE:				
	Electroni	Signature of Registered Age	nt	Date	
Election Carr	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () I PEREZ, JORGE 16342 SW 53 TE MIAMI, FL 3318		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () I ERAZO, PATRIC 16342 SW 53 TE MIAMI, FL 3318	RRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () I PEREZ, ISABEL 16342 SW 53 TE MIAMI, FL 3318		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	TD ()I	Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: PEREZ JORGE P 04/30/2008