2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000041062

FILED
Mar 08, 2004
Secretary of State

Entity Name: SKIN CARE BY SUSAN, INC.

Current Principal Place of Business:

4765 HOLLYWOOD AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

540 E.HORATIO AVE.
103
MAITLAND, FL 32751

Current Mailing Address:

4765 HOLLYWOOD AVENUE
WINTER PARK, FL 32789

New Mailing Address:

1765 HOLLYWOOD AVENUE
WINTER PARK, FL 32789

FEI Number: 56-2351512 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KEENE, SUSAN E
4765 HOLLYWOOD AVENUE
WINTER PARK, FL 32789

Name and Address of New Registered Agent:

KEENE, SUSAN E
1765 HOLLYWOOD AVENUE
WINTER PARK, FL 32789

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: ______________________________ 03/08/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KEENE, SUSAN E
Address: 1765 E. HOLLYWOOD AVENUE
City-St-Zip: WINTER PARK, FL 32789

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 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: SUSAN E. KEENE O 03/08/2004
Electronic Signature of Signing Officer or Director Date