2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

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Entity Name: ESTHETIC SKIN INSTITUTE, INC.

Current Principal Place of Business:

1120 S. FEDERAL HIGHWAY
SUITE 4
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

508 SW 5 AVE
FT LAUDERDALE, FL 33315

New Mailing Address:

FEI Number: 56-2391525 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SASHA, PARKER S PRES
508 SW 5TH AVE
FORT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: PARKER, SASHA S
Address: 508 SW 5 AVE
City-St-Zip: FT LAUDERDALE, FL 33315

Title: VP ( ) Delete
Name: PARKER, PETER J
Address: 930 SW 28TH STREET; APT 2
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: TREA ( ) Delete
Name: POLEMENI, RICHARD A
Address: PO BOX 22203
City-St-Zip: FORT LAUDERDALE, FL 33335

Title: SCTY ( ) Delete
Name: PARKER, NATALYA
Address: 930 SW 28TH STREET; APT 2
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: SASHA PARKER PRES 01/09/2007

Electronic Signature of Signing Officer or Director — Date