

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096073

FILED  
Mar 25, 2009  
Secretary of State

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 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

03/25/2009

Electronic Signature of Signing Officer or Director

Date