## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## May 08, 2006 08:00 AM Secretary of State DOCUMENT # P03000121360 1. Entity Name ESTHETIC VENTURES ETC, INC. Principal Place of Business Mailing Address 169 SW 3RD STREET 169 SW 3RD STREET POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 05052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 51-0488587 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent DERMAKE, ROBIN J DO NOT WRITE 169 SW 3RD STREET POMPANO BEACH, FL 33060 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIL FEE IS \$550.00 Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 18. TITLE DERMAKE, ROBIN J NAME STREET ADDRESS 169 SW 3RD STREET CITY-ST-ZIP POMPANO BEACH, FL 33060 U00000563033 TITLE 05/19/06-90079-005 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY - ST - ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 in changed, or on an attachment with an address, with all other like empowered.

**FILED**