



**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 17, 2006 08:00 AM
Secretary of State**

DOCUMENT # P04000004556 1. Entity Name ADVANCED AESTHETIC RESOURCES, INC.		
Principal Place of Business 6065 IBIS STREET SARASOTA, FL 34241 US	Mailing Address 6065 IBIS STREET SARASOTA, FL 34241 US	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent ODIERNA, CHRIS M 6065 IBIS STREET SARASOTA, FL 34241		DO NOT WRITE 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. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLS, TIMOTHY M 3098 S. OAKLAND FOREST DRIVE, #1506 OAKLAND PARK, FL 33309	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ODIERNA, CHRISTOPHER M 6065 IBIS STREET SARASOTA, FL 34241	
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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 if changed, or on an attachment with an address, with all other information empowered.		
SIGNATURE: X  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/11/06 941-915-2697 <small>Date Daytime Phone #</small>

CHRIS M. ODIERNA, V.P.