

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000016978

FILED
Aug 29, 2005
Secretary of State

Entity Name: CLINICA DE ESTETICA SPA CRUZ & K SKIN CARE, INC.

Current Principal Place of Business:

383 WEST WARD DRIVE
MIAMI, FL 33166 US

New Principal Place of Business:

Current Mailing Address:

383 WEST WARD DRIVE
MIAMI, FL 33166 US

New Mailing Address:

FEI Number: 42-1617985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, CRUZ M
741 SE 7TH PLACE
HIALEAH, FL 33010 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEREZ, CRUZ M
Address: 741 SE 7TH PLACE
City-St-Zip: HIALEAH, FL 33010

Title: VP () Delete
Name: MARTINEZ, AMERICO
Address: 383 WEST WARD DRIVE
City-St-Zip: HIALEAH, FL 33010

Title: SEC () Delete
Name: FELIX, VICTOR
Address: 383 WEST WARD DRIVE
City-St-Zip: HIALEAH, FL 33010

Title: TRE () Delete
Name: SEGOVIA, MARIA
Address: 383 WEST WARD DRIVE
City-St-Zip: HIALEAH, FL 33010

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 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: CRUZ M PEREZ

P

08/29/2005

Electronic Signature of Signing Officer or Director

Date