2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 21, 2006
Secretary of State

DOCUMENT# P04000022850

Entity Name: LIGHTHOUSE POINT CENTER FOR PERMANENT COSMETICS & SCAR RESTORATION, INC.

Current Principal Place of Business:

2731 NE 36TH ST
LIGHTHOUSE POINT, FL 33064

New Principal Place of Business:

6018 SW 18TH ST.
C-11
BOCA RATON, FL 33433

Current Mailing Address:

2731 NE 36TH ST
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

6018 SW 18TH ST.
C-11
BOCA RATON, FL 33433

FEI Number: 58-2683659 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, MARIA
2731 NE 36TH ST
LIGHTHOUSE POINT, FL 33064 US

Name and Address of New Registered Agent:

COHEN, MARIA
6018 SW 18TH ST.
C11
BOCA RATON, FL, FL 33433 US

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: MARIA COHEN 09/21/2006
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: DPS ( ) Delete
Name: COHEN, MARIA
Address: 2731 NE 36TH ST
City-St-Zip: LIGHTHOUSE POINT, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: COHEN, MARIA
Address: 6018 SW 18TH ST., SUITE C11
City-St-Zip: BOCA RATON, FL 33433

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: MARIA COHEN DPS 09/21/2006
Electronic Signature of Signing Officer or Director Date