2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000105010

Entity Name: WAVES HEALING CENTER & DAY SPA, INC.

FILED Jan 07, 2011 Secretary of State

| Current Principa | al Place of Business: | New Principal Place of Business: |
|------------------|-----------------------|----------------------------------|
| | | |

FLORIDA INTERNATIONAL UNIVERSITY
11200 SW 8TH ST. GC 1241
MIAMI, FL 33199

FLORIDA INTERNATIONAL UNIVERSITY
11200 SW 8TH ST. GC 1241 WAVES SPA
MIAMI, FL 33199

Current Mailing Address: New Mailing Address:

7675 SW 106 AVE MIAMI, FL 33173

FEI Number: 90-0187975 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUIZ-MARINO, ISABEL 7675 SW 106 AVE MIAMI, FL 33173 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

 Name:
 RUIZ-MARINO, ISABEL

 Address:
 7675 SW 106 AVE.

 City-St-Zip:
 MIAMI, FL 33173

Title: VP

Name: MARINO, DAVID Address: 7675 SW 106 AVE. City-St-Zip: MIAMI, FL 33173

I hereby 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 all other like empowered.

SIGNATURE: ISABEL RUIZ MARINO P 01/07/2011