2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2011
Secretary of State

DOCUMENT# P04000134151

Entity Name: EVOLIS, INC.

Current Principal Place of Business:

3201 W. COMMERCIAL BLVD
SUITE 110
FORT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

3201 W. COMMERCIAL BLVD
SUITE 110
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 20-1690680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JADE ASSOCIATES MIAMI, INC
100 N BISCAYNE BLVD
SUITE 500
MIAMI, FL 33132 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

OFFICERS AND DIRECTORS:

Title: P
Name: PICOT, EMMANUEL P
Address: 29 AV DE LA FONTAINE - ZI ANGERS
City-St-Zip: BEAUCOUZE, FR 49070 FR

Title: ST
Name: BELANGER, CECILE ST
Address: 29 AV DE LA FONTAINE - ZI ANGERS
City-St-Zip: BEAUCOUZE, FR 49070 FR

Title: D
Name: GODARD, DIDIER D
Address: 29 AV DE LA FONTAINE - ZI ANGERS
City-St-Zip: BEAUCOUZE, FR 49070 FR

Title: D
Name: OLIVIER, SERGE D
Address: 29 AV DE LA FONTAINE - ZI ANGERS
City-St-Zip: BEAUCOUZE, FR 49070 FR

Title: D
Name: LIATARD, YVES D
Address: 29 AV DE LA FONTAINE - ZI ANGERS
City-St-Zip: BEAUCOUZE, FR 49070 FR

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: EMMANUEL PICOT P 02/20/2011

Electronic Signature of Signing Officer or Director Date