

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

9/9/2005-90031-021-\$150.00-\$150.00

FILED

05 OCT 13 PM 4: 04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2nd MOORE

CR2E034 (5/05)

DOCUMENT # P04000146039

1. Entity Name

ANDREA POTTER SKIN CARE, INC.



Principal Place of Business

6260 12TH AVE SW  
NAPLES FL 34116

Mailing Address

6260 12TH AVE SW  
NAPLES FL 34116

2. Principal Place of Business

~~FL~~

3. Mailing Address

24870 Quixote Ave

Suite, Apt. #, etc.

5308 Kensington Park Blvd

Suite, Apt. #, etc.

City & State

Naples FL

City & State

Bonita Springs, FL

Zip

34105

Country

US

Zip

34135

Country

US

4. FEI Number

27-0108173

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

POTTER, ANDREA  
6260 12TH AVE SW  
NAPLES FL 34116

7. Name and Address of Now Registered Agent

Name

Andres Potter

Street Address (P.O. Box Number is Not Acceptable)

24870 Quixote Ave

City

Bonita Springs

FL

Zip Code

34135

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$550.00

DUE BY September 7, 2005

Make Check Payable to Florida Department of State

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
☐ Delete

D  
POTTER, ANDREA  
6260 12TH AVE SW  
NAPLES FL 34116

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
☒ Change ☐ Addition

24870 Quixote Ave  
Bonita Springs, FL 34135

TITLE  
NAME  
STREET ADDRESS  
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 like empowered.

SIGNATURE:

Andres S Potter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-6-05

Date

2394385595

Daytime Phone