

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013131

FILED  
Jan 12, 2010  
Secretary of State

**Entity Name:** GARCIA FACIAL PLASTIC SURGERY INSTITUTE, INC.

**Current Principal Place of Business:**

700 3RD ST. SUITE #102  
NEPTUNE BEACH, FL 32266

**New Principal Place of Business:**

**Current Mailing Address:**

700 3RD ST. SUITE #102  
NEPTUNE BEACH, FL 32266

**New Mailing Address:**

FEI Number: 59-3748055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GARCIA, JOHN F  
13872 MANDARIN DRIVE  
JACKSONVILLE, FL 32223 US

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

GARCIA, JOHN F  
13872 MANDARIN ROAD  
JACKSONVILLE, FL 32223 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

01/12/2010

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GARCIA, JOHN F  
Address: 13872 MANDARIN RD  
City-St-Zip: JACKSONVILLE, FL 32223

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: JOHN F GARCIA

Electronic Signature of Signing Officer or Director

P

01/12/2010

Date