## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Apr 24, 2006 8:00 am Secretary of State

Daytime Phone #

Date

DOCUI 1. Entity Nam SKIN CAF				04-24-2006 90359 017 ***158.75								
Principal Place of Business 7280 W. PALMETTO PARK ROAD SUITE 305 BOCA RATON, FL 33433 US			Mailing Address 7280 W. PALMETTO PARK ROAD SUITE 305 BOCA RATON, FL 33433 US				 			<b>i i i</b> i i i i i i i i i i i i i i i i		
2. Principal Place of Business 21301 Rowerline Road			3. Mailing Address 21301 Powerline Road Suite, Apt. #, etc.						<b>5 ((3) L 1(3) L</b> (()			
Suite, Apt. #, etc. Suite 10			Suite 101 City & State				04182006 4. FEI Numb	Chg-P	CR2E03	34 (11/05)	plied For	
Boca Raton, FL			Borg Raton, FL				56-	251101		No	t Applicable	
33433		Country	<sup>Zip</sup> 33433				L	of Status Desired	۶ س	8.75 Addi		
5. Name and Address of Current Registered Agent						Name SALOM / VIER						
SHEMESH 7280 W. P. SUITE 305 BOCA RA	ÁLMETTO 5			Street Ad	idress (I		er is Not Acceptable	Roc	id Su	ite 101		
ja (						ca	Raton		FL	Zip Code	3433	
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												
FILE NOWILL FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees												
10.	Р	OFFICERS AND D	DIRECTORS  Delete	11,		Ρ		/CHANGES TO OF		DIRECTORS Change	S tN 11	
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TITLE			☐ Delete	TITLE						☐ Change	Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.  SIGNATIBE:												