

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000087071

FILED
Feb 04, 2008
Secretary of State

Entity Name: PERMANENT MAKE UP INSTITUTE INC

Current Principal Place of Business:

150 NW 70 AVENUE
SUITE 8
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

150 NW 70 AVENUE
SUITE 8
PLANTATION, FL 33317

New Mailing Address:

5601 SW 82 AVENUE
DAVIE, FL 33328 US

FEI Number: 83-0432696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PENA, YOLANDA
150 NW 70 AVENUE
SUITE 8
PLANTATION, FL 33317 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PENA, YOLANDA
Address: 150 NW 70 AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PENA, YOLANDA
Address: 150 NW 70 AVENUE SUITE#8
City-St-Zip: PLANTATION, FL 33317

Title: VP () Change (X) Addition
Name: ANDRES, BUSTILLO
Address: 5601 SW 82 AVENUE
City-St-Zip: DAVIE, FL 33328 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: YOLANDA PENA

PRES

02/04/2008

Electronic Signature of Signing Officer or Director

Date