2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000095786

Entity Name: SKIN CARE URRSAS INC

FILED Jan 05, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

20505 S DIXIE HWY MIAMI, FL 33189

Current Mailing Address: New Mailing Address:

24571 SW 112TH COURT 24571 SW 112 COURT HOMESTEAD, FL 33032 HOMESTEAD, FL 33032

FEI Number: 37-1512497 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LUNA, GILBERTO
24571 SW 112TH COURT
HOMESTEAD, FL 33032 US
LUNA, GILBERTO
24571 SW 112 COURT
HOMESTEAD, FL 33032 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: GILBERTO LUNA 01/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 GUIDO, LUISA A
 Name:
 GUIDO, LUISA A

 Address:
 24571 SW 112TH COURT
 Address:
 10700 NW 7ST APT 8

 City-St-Zip:
 HOMESTEAD, FL 33032
 City-St-Zip:
 MIAMI, FL 33172

Title: () Delete Title: VP () Change (X) Addition

 Name:
 Name:
 ALVAREZ, URSULA M

 Address:
 Address:
 10700 NW 7ST #8A

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33172

Title: () Delete Title: SC () Change (X) Addition

 Name:
 Name:
 ALVAREZ, SASHA M

 Address:
 Address:
 10700 NW 7ST #8A

 City-St-Zip:
 City-St-Zip:
 MIAM, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the 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: LUISA ANTONIA GUIDO P 01/05/2006