2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000102093

Name:

Address:

City-St-Zip:

HIRSCH, HOWARD L

DELTONA, FL 32725

1776 PROVIDENCE BLVD

FILED Apr 29, 2006 Secretary of State

Entity Nar	ne: SKIN P	URE, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
1012 SOUTHERN OAK LANE APOPKA, FL 32712				326 SPEYSIDE LANE APOPKA, FL 32712			
Current Mailing Address:				New Mailing Address:			
1012 SOUTHERN OAK LANE APOPKA, FL 32712				P.O. BOX 868 APOPKA, FL 32704			
FEI Number: 20-3190283 FEI Number Applied For ()			FEI Num	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1776 PRO'DELTONA The above	HOWARD L VIDENCE BI , FL 32725 named entite of Florida.	US	he purpose of	f changing i	ts registered	d office or registered agent, or	both,
SIGNATUR							
Election Car		onic Signature of Registered ing Trust Fund Contribution().	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	BRADLEY, B 560 BRECKE	() Delete ARRY J ENRIDGE VILLAGE #11 SPRINGS, FL 32714		Title: Name: Address: City-St-Zip:	P BRADLEY, E 2552 WYND APOPKA, FL	AM BAY PLACE	
Title: Name: Address: City-St-Zip:	ROBINSON,	ERN OAK LANE		Title: Name: Address: City-St-Zip:	CEO ROBINSON, 326 SPEYS APOPKA, FL	IDE LANE	
Title:	VP,T	() Delete		Title:		() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: HOWARD L HIRSCH VΡ 04/29/2006