2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128462

Entity Name: RESULTS LASER TREATMENT CENTER INC

FILED Jun 06, 2006 Secretary of State

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

1409 N FORT HARRISON AVE 13355 S. BELCHER RD.

STE D STE S CLEARWATER, FL 33755 US LARGO, FL 33773

Current Mailing Address: New Mailing Address:

13355 S. BELCHER RD. 1409 N FORT HARRISON AVE STE D STE S CLEARWATER, FL 33755 US LARGO, FL 33773 US

FEI Number: 20-3494568 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:

JOVIA, SHARON JOVIA, SHARON 1409 N FT HARRISON AVE 13355 S. BELCHER RD. STE D STE S CLEARWATER, FL 33755 US LARGO, FL 33773 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: 06/06/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition JOVIA, SHARON Name: Name: JOVIA, SHARON FLOWER 1409 N FT HARRISON AVE STE D 13355 S. BELCHER RD. SUITE S Address: Address: City-St-Zip: CLEARWATER, FL 33755 US City-St-Zip: LARGO, FL 33773 US

() Delete Title: Title: (X) Change () Addition SOMERS, COURTNEY LEIGH Name: SOMERS, COURTNEY LEIGH Name: 1409 N FT HARRISON AVE STE D Address: 13355 S. BELCHER RD. SUITE S Address: CLEARWATER, FL 33755 US LARGO, FL 33773 US City-St-Zip: City-St-Zip:

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: SHARON FLOWER JOVIA **PRES** 06/06/2006