

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000151958

FILED
Jan 31, 2007
Secretary of State

Entity Name: FACIAL SCULPTING OF TAMPA BAY, INC.

Current Principal Place of Business:

3925 MOORES LAKE RD.
DOVER, FL 33527

New Principal Place of Business:

11012 N. DALE MABRY
304
TAMPA, FL 33618

Current Mailing Address:

3925 MOORES LAKE ROAD
DOVER, FL 33527

New Mailing Address:

FEI Number: 20-3805165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDREASEN, ANDREA L
3925 MOORES LAKE RD.
DOVER, FL 33527 US

Name and Address of New Registered Agent:

ANDREASEN, ALLAN L
3925 MOORES LAKE RD.
DOVER, FL 33527 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: ALLAN ANDREASEN

01/31/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: ANDREASEN, ANDREA L
Address: 3925 MOORES LAKE RD.
City-St-Zip: DOVER, FL 33527

Title: VP () Delete
Name: ANDREASEN, ALLAN B
Address: 3925 MOORES LAKE ROAD
City-St-Zip: DOVER, FL 33527

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: ANDREASEN, ANDREA L
Address: 3925 MOORES LAKE RD.
City-St-Zip: DOVER, FL 33527

Title: T (X) Change () Addition
Name: ANDREASEN, ALLAN B
Address: 3925 MOORES LAKE ROAD
City-St-Zip: DOVER, FL 33527

Title: P/D () Change (X) Addition
Name: BAKER, RAY
Address: 11012 N. DALE MABRY ST. 304
City-St-Zip: TAMPA, FL 33618

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: RAY BAKER

P

01/31/2007

Electronic Signature of Signing Officer or Director

Date