2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# P06000140797

Entity Name: MILESTONES MEDICAL AND SKIN REJUVINATION CENTER, INC.

Current Principal Place of Business:

500 N HIATUS RD
SUITE 103
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 820897
SOUTH FLORIDA, FL 33082

New Mailing Address:

FEI Number: 02-0790422 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DE LA PAZ, YIRA L
500 N HIATUS RD.
SUITE 103
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

DE LA PAZ, YIRA L
500 N HIATUS RD.
SUITE 103
PEMBROKE PINES, FL 33026 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: 04/29/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DE LA PAZ, YIRA L
Address: 500 N HIATUS RD, SUITE 103
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: YIRA DE LA PAZ MGR 04/29/2008
Electronic Signature of Signing Officer or Director — Date