

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000145406

FILED
Apr 21, 2009
Secretary of State

Entity Name: BODY DETAILS - PALM BEACH GARDENS, INC.

Current Principal Place of Business:

3309 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Principal Place of Business:

4290 PROFESSIONAL CENTER DRIVE
SUITE 301
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

3309 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Mailing Address:

4290 PROFESSIONAL CENTER DRIVE
SUITE 301
PALM BEACH GARDENS, FL 33410

FEI Number: 20-5988655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALLEJO, BRYAN
3691 TURTLE RUN BLVD #437
CORAL SPRINGS, FL 33067 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: KORNFELD, RUBEN
Address: 607 GASMERE ROAD
City-St-Zip: MAHWAH, NJ 07430

Title: VCOO () Delete
Name: BALLEJO, BRYAN
Address: 3691 TURTLE RUN BLVD #437
City-St-Zip: CORAL SPRINGS, FL 33067

Title: AD () Delete
Name: BALLEJO, BRYAN
Address: 3691 TURTLE RUN BLVD #437
City-St-Zip: CORAL SPRINGS, FL 33067

Title: PCEO () Delete
Name: SORRENTINO, CLAUDIO V
Address: 5510 PACIFIC BLVD. #118
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: SORRENTINO, CLAUDIO V
Address: 5510 PACIFIC BLVD #118
City-St-Zip: BOCA RATON, FL 33433

Title: S () Delete
Name: SORRENTINO, NANDO
Address: 3180 S. OCEAN DRIVE #1009
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: BRYAN BALLEJO

VCOO

04/21/2009

Electronic Signature of Signing Officer or Director

Date