2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000149163

Entity Name: MIAMI AESTHETIC SURGERY CENTER, P.A.

FILED Jan 06, 2012 Secretary of State

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

7400 SW 88 STREET 7400 SW 88 STREET

SUITE 303 SUITE 311

MIAMI, FL 33156 US MIAMI, FL 33156 US

Current Mailing Address: New Mailing Address:

7400 SW 88 STREET 7400 SW 88 STREET

SUITE 303 SUITE 311

MIAMI, FL 33156 US MIAMI, FL 33156 US

FEI Number: 20-5975442 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:

RODRIGUEZ, OFER
7400 SW 88 STREET
SUITE 303
MIAMUEL 33155 LIS

SUITE 303 MIAMI, FL 33155 UMIAMI, FL 33156 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: OFER RODRIGUEZ 01/06/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

 Name:
 RODRIGUEZ, OFER

 Address:
 2525 SW 64 AVENUE

 City-St-Zip:
 MIAMI, FL 33155 US

Title: TRES

 Name:
 RODRIGUEZ, OFER

 Address:
 2525 SW 64 AVENUE

 City-St-Zip:
 MIAMI, FL 33155 US

Title: SECT

 Name:
 RODRIGUEZ, OFER

 Address:
 2525 SW 64 AVENUE

 City-St-Zip:
 MIAMI, FL 33155 US

Title: DIR

 Name:
 RODRIGUEZ, OFER

 Address:
 2525 SW 64 AVENUE

 City-St-Zip:
 MIAMI, FL 33155 US

I hereby 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 all other like empowered.

SIGNATURE: OFER RODRIGUEZ PRES 01/06/2012