

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000013971

Entity Name: PETALS SKIN SPA, INC.

**FILED**  
**Aug 03, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

601 E STRAWBRIDGE AVE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

601 E STRAWBRIDGE AVE  
MELBOURNE, FL 32901

**New Mailing Address:**

FEI Number: 20-8346478

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, ELLEN M  
188 HAWTHORNE LANE NE  
PALM BAY, FL 32907 US

**Name and Address of New Registered Agent:**

SMITH, ELLEN M  
2225 HWY A1A #301  
IHB, FL 32937 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: ELLEN SMITH

08/03/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SMITH, ELLEN M  
Address: 2225 HWY A1A #301  
City-St-Zip: IGB, FL 32937

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: ELLEN SMITH

OWNE

08/03/2010

Electronic Signature of Signing Officer or Director

Date