

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024007

FILED
May 01, 2008
Secretary of State

Entity Name: FACE, BODY & MORE INT'L MEDICAL AGENCY, CORP

Current Principal Place of Business:

11810 SW 12 ST
MIAMI, FL 33184 US

New Principal Place of Business:

Current Mailing Address:

11810 SW 12 ST
MIAMI, FL 33184 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIO, ODALYS
11810 SW 12 ST
MIAMI, FL 33184 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RUBIO, ODALYS
Address: 11810 SW 12 ST
City-St-Zip: MIAMI, FL 33184 US

Title: VP () Delete
Name: MARTIN, JULIO
Address: 8931 NW 111 TER
City-St-Zip: HIALEAH GARDENS, FL 33018 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: RUBIO, ODALYS
Address: 11810 SW 12 ST
City-St-Zip: MIAMI, FL 33184 US

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: ODALYS RUBIO

P

05/01/2008

Electronic Signature of Signing Officer or Director

_____ Date