## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000073394

Address:

City-St-Zip:

2535 ST JOHNS BLVD

JACKSONVILLE BEACH, FL 32250 US

Entity Name: TOTAL BODY AESTHETICS, INC.

FILED Apr 19, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
340 3RD A\	√E S.			4540 SOUTHSIDE BLVD		
C JACKSONV	/ILLE BEACH,	FL 32250 US	3	STE 701 JACKSONVILLE, FL 3221	6 US	
Current Mailing Address:				New Mailing Address:		
2535 ST JC JACKSON\	HNS BLVD /ILLE BEACH,	FL 32250 US	6	4540 SOUTHSIDE BLVD STE 701 JACKSONVILLE, FL 3221	6 US	
FEI Number:	26-0421714	FEI Number Appl	lied For ( ) FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name				Name and Address of No	ame and Address of New Registered Agent:	
2535 ST JC JACKSON\	/ILLE BEACH,	FL 32250 US		f changing its registered of	ice or registered agent, or both,	
SIGNATUR	E:					
	Electron	ic Signature of Re	egistered Agent		Date	
Election Cam	paign Financing	Trust Fund Contrib	bution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	COUSER, STEF 2535 ST JOHNS		US	Title: ( ) 0 Name: Address: City-St-Zip:	Change ()Addition	
Title: Name:	VP,T ()	Delete FORD A		Title: ( ) (	Change ( ) Addition	

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: SKCOUSER PRES 04/19/2009