

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000083213

FILED
May 01, 2008
Secretary of State

Entity Name: INSTITUTE FOR AESTHETIC MEDICINE, INC.

Current Principal Place of Business:

5201 BLUE LAGOON DRIVE
SUITE 800
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

5201 BLUE LAGOON DRIVE
SUITE 800
MIAMI, FL 33126

New Mailing Address:

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

Name and Address of Current Registered Agent:

WRIGHT, G
1327 SIESTA BAYSIDE RIVE
SARASOTA, FL 34242 US

Name and Address of New Registered Agent:

WRIGHT, G
5201 BLUE LAGOON DRIVE
SUITE 800
MIAMI, FL 33126 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: GREGORY S. WRIGHT

05/01/2008

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: CEO () Delete
Name: VANDRUFF, CINDY
Address: 5201 BLUE LAGOON DRIVE, SUITE 800
City-St-Zip: MIAMI, FL 33126

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES () Change (X) Addition
Name: WRIGHT, GREGORY
Address: 5201 BLUE LAGOON DRIVE, SUITE 800
City-St-Zip: MIAMI, FL 33126

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: GREGORY S WRIGHT

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date