2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000085978

Entity Name: SPA VENICE, INC

FILED Jun 18, 2008 Secretary of State

Entity Nan	IIE. SPAVI	LINICE, IIIC.					
Current Principal Place of Business:				New Principal Place of Business:			
225 W. MI. VENICE, F		US					
Current Mailing Address:				New Mailing Address:			
PO BOX 17 VENICE, F							
FEI Number:	33-1176471	FEI Number Applied F	or () FEI Nu	mber Not Appl	icable () Ce	rtificate of Statu	s Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
JURACSIK 225 W. MIA VENICE, F		M US					
	named entit of Florida.	y submits this statement	for the purpose o	of changing it	s registered office	or registered	agent, or both,
SIGNATUF							
	Electr	onic Signature of Regist	ered Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P BUITRON, D PO BOX 170 VENICE, FL	0		Title: Name: Address: City-St-Zip:	() Cha	inge () Addition	
Title: Name: Address: City-St-Zip:		() Delete		Title: Name: Address: City-St-Zip:	T () Cha MICHAELS, ANNET PO BOX 1700 VENICE, FL 34284	inge (X) Addition TE	
Title: Name: Address: City-St-Zip:		() Delete		Title: Name: Address: City-St-Zip:	S () Cha MICHAELS, ANNET PO BOX 1700 VENICE, FL 34284	inge (X) Addition TE	

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: ANNETTE MICHAELS T 06/18/2008