

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000123776

FILED
Oct 16, 2008
Secretary of State

Entity Name: SILHOUETTES BODY WRAP SPA, INC.

Current Principal Place of Business:

2270 S. MCCALL ROAD
ENGLEWOOD, FL 34224

New Principal Place of Business:

2240 S. MCCALL ROAD
ENGLEWOOD, FL 34224

Current Mailing Address:

2270 S. MCCALL ROAD
ENGLEWOOD, FL 34224

New Mailing Address:

2240 S. MCCALL ROAD
ENGLEWOOD, FL 34224

FEI Number: 26-1559938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STAAS, KEVIN G ESQ
245 N. TAMIAMI TRAIL,
STE. F
VENICE, FL 34285 US

Name and Address of New Registered Agent:

CAIN-KELLY, CHARITY T
109 ARROW LANE
ROTONDA WEST, FL 33947 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: CHARITY CAIN KELLY

10/16/2008

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: P () Delete
Name: CAIN-KELLY, CHARITY T
Address: 2270 S. MCCALL ROAD
City-St-Zip: ENGLEWOOD, FL 34224

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAIN-KELLY, CHARITY T
Address: 109 ARROW LANE
City-St-Zip: ROTONDA WEST, FL 3394 US

Title: VP () Change (X) Addition
Name: KELLY, DAVID A
Address: 109 ARROW LANE
City-St-Zip: ROTONDA WEST, FL 33947 US

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: CHARITY CAIN-KELLY

D

10/16/2008

Electronic Signature of Signing Officer or Director

Date