2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000127573

Entity Name: LASER PRISTINE PA

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	STAL BAY BLY N BEACH, FL,		US				
Current Mailing Address:				New Mailing Address:			
	STAL BAY BLY N BEACH, FL, I		US				
FEI Number	: 26-1553235	FEI Numb	per Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Re	gistered Agent:	Name and	Address	of New Registered Agent:	
320 S. FLA #347 PEMBRON	AMINGO ROAI KE PINES, FL) 33027 US		ourpose of changing i	ts registere	d office or registered agent, or both,	
	e of Florida.			- a. p a. a	10 / 0g.010.0	a cinoc or regional agent, or bear,	
SIGNATU	RE:						
	Electror	nic Signatui	re of Registered Ag	ent		Date	
Election Car	mpaign Financin	g Trust Fund	l Contribution ().				
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PRES () CASSIDY, GIUI 1107 COASTAI BOYNTON BEA	BAY BLVD.	33435 US	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	TRES () CASIDY, GIULI 1107 COASTAI BOYNTON BEA	BAY BLVD.	33435 US	Title: Name: Address: City-St-Zip:		(X) Change () Addition GIULIANA TAL BAY BLVD. BEACH, FL, FL 33435 US	
Title: Name: Address: City-St-Zip:	SECT () CASSIDY, GIUI 1107 COASTAI BOYNTON BEA	BAY BLVD.	33435 US	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	DIR () CASSIDY, GIUI 1107 COASTAI			Title: Name: Address:		() Change () Addition	

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.

City-St-Zip:

SIGNATURE: GIULIANA CASSIDY PRES 04/17/2008

BOYNTON BEACH, FL, FL 33435 US

City-St-Zip: