

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000061789

Entity Name: SONIA SKIN CARE, INC.

FILED
Jul 26, 2009
Secretary of State

Current Principal Place of Business:

1681 N HIATUS RD
PEMBROKE PINES, FL 33026

New Principal Place of Business:

Current Mailing Address:

1681 N HIATUS RD
PEMBROKE PINES, FL 33026

New Mailing Address:

7439 W 31 AVE
HIALEAH, FL 33018

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERREIRA, ZUNILDA
1681 N HIATUS RD
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

FERREIRA, ZUNILDA
7439 W 31 AVE
HIALEAH, FL 33018 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: ZUNILDA FERREIRA

07/26/2009

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: PD () Delete
Name: FERREIRA, ZUNILDA
Address: 1681 N HIATUS RD
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FERREIRA, ZUNILDA
Address: 7439 W 31 AVE
City-St-Zip: HIALEAH, FL 33018

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: ZUNILDA FERREIRA

PD

07/26/2009

Electronic Signature of Signing Officer or Director

Date