

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000001569

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** TAMMY FENDER HOLISTIC SKIN CARE, INC.

**Current Principal Place of Business:**

711 NORTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

711 NORTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

**FEI Number:** 26-4021150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NANCY HANLON ASSOCIATES, INC.  
6266 S. CONGRESS AVE #L5  
LANTANA, FL 33462 US

**Name and Address of New Registered Agent:**

MICHAEL TILLET PA  
901 SOUTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33416-470 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: MICHAEL TILLET

04/22/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FENDER, TAMMY  
Address: 711 NORTH FLAGLER DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: TAMMY FENDER

P

04/22/2011

Electronic Signature of Signing Officer or Director

Date