

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000024039

Entity Name: BELLA SKIN & BODY INC.

**FILED**  
**Sep 01, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

13608 BOTANY BAY CT.  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

13608 BOTANY BAY CT.  
RIVERVIEW, FL 33569

**New Mailing Address:**

P.O. BOX 2965  
RIVERVIEW, FL 33568

FEI Number: 90-0494318

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PADILLA, NEREIDA  
13608 BOTANY BAY CT.  
RIVERVIEW, FL 33569 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D/P  
Name: PADILLA, NEREIDA  
Address: 13608 BOTANY BAY CT.  
City-St-Zip: RIVERVIEW, FL 33569

Title: VP/T  
Name: PADILLA, NEREIDA  
Address: 13608 BOTANY BAY CT.  
City-St-Zip: RIVERVIEW, FL 33569

Title: S  
Name: PADILLA, NEREIDA  
Address: 13608 BOTANY BAY CT.  
City-St-Zip: RIVERVIEW, FL 33569

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: NEREIDA PADILLA

PD

09/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date