

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000101077

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Entity Name:** TAMPABAY SMARTLIPO AND REJUVENATION CENTERS, INC.

**Current Principal Place of Business:**

3720 TAMPA ROAD  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

**Current Mailing Address:**

3720 TAMPA ROAD  
PALM HARBOR, FL 34684

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

HUGHES, LORI M  
1806 LAGO VISTA BLV  
PALM HARBOR, FL 34685      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: LORI HUGHES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HUGHES, LORI M  
Address: 3720 TAMPA ROAD  
City-St-Zip: PALM HARBOR, FL 34684

Title: S  
Name: HUGHES, LORI M  
Address: 3720 TAMPA ROAD  
City-St-Zip: PALM HARBOR, FL 34684

Title: T  
Name: HUGHES, LORI M  
Address: 3720 TAMPA ROAD  
City-St-Zip: PALM HARBOR, FL 34684

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: LORI M . HUGHES

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

PRES

02/25/2011

\_\_\_\_\_  
Date