## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000019157

Entity Name: SOUTH FLORIDA SKIN CENTER, INC.

FILED Mar 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2866 TAMIAMI TRAIL SUITE A

PORT CHARLOTTE, FL 33952 US

Current Mailing Address: New Mailing Address:

2866 TAMIAMI TRAIL SUITE A

PORT CHARLOTTE, FL 33952 US

FEI Number: 65-0384510 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CONANT, JONATHAN D

CONANT, JONATHAN D JAY HER

2022 HENDRY STREET

FT MYERS, FL 33902 US

CONANT, JONATHAN D JAY HER

2022 HENDRY STREET

FT MYERS, FL 33902 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: JAY HERBST 03/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: (X) Change ( ) Addition Name: HERBST, JAY S Name: HERBST, JAY S JAY HER 2866-A TAMIAMI TRAIL 2866-A TAMIAMI TRAIL Address: Address: City-St-Zip: PORT CHARLOTTE, FL City-St-Zip: PORT CHARLOTTE, FL 33907

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: JAY S HERBST MD PSD 03/28/2009