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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # <b>P93000057171 (9)</b> 1. Corporation Name										
SKIN C	are techno	)LOGIES, IN	NC.							
Principal Place of	of Business		Maili	ing Address			T I I I I I I I I I I I I I I I I I I I		<b>8</b> 1 <b>6</b> 1140 <b>1400</b> 01 400	INT SM MMT DEMY AMAN
415 MOUNTAI	IN DRIVE		41	15 MOUNTAIN DRIVE						
STE. 7			\$	TE. 7						
DESTIN FL 32	2541		Đ	ESTIN FL 32541			3. Date Incorporated or Qualif	ied <b>3a</b> . D	ate of Last R	leport
							08/16/1993		05/01/19	95
2. Principal Plac	e of Business		<del></del>	Mailing Address			4. FEI Number		<b>⊢</b> —+	Applied For
1	···		26	2.3. 4.1.41.			59-3199099			Not Applicable  Additional
Suite, Apt. #,	etc.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired	<sup>3</sup> □	7	Required
City & State				City & State			6. Election Campaign Financin	)g	\$5.0	<b>0</b> May Be
3			28				Trust Fund Contribution		Adde	d to Fees
Zip	1	untry		Zip	Count	try	8. This corporation has liability			199.032,
4	25	44	29	and Asset	30		Florida Statutes  10. Name and Address of No.	Yes No		
	g. Name and A	agress of Curr	ent registe	nea Agent	E	Name	10. Halle Blic Acciess of the	on riogistore	o Agoni	
GALVAN	EDANK						00.5			
	•				3	Street Add	lress (P.O. Box Number is Not Acce	eptable)		
415 MOUNTAIN DRIVE STE. 7					8	33				
DESTIN	FL 32541				_	A City			05 7	ip Code
DECIMAL OF OTAL						65 Zip			ip code	
or registere	d agent, or both, in	i the State of Fid	orida. Such d	change was authoriz	ed by the co	e-named corpo orporation's boa	oration submits this statement for the and of directors. I hereby accept the	appointment	as registered	d agent. I am
or registere familiar with SIGNATURE	d agent, or both, in	n the State of Fid bligations of, So name of registered ag	orida. Such o action 607.05 pent and tille if an	change was authoriz 505, Florida Statutes picable. (NC	ed by the co TE: Registered A	e-named corpo rporation's boa gent signature require	ard of directors. I hereby accept the	appointment	as registera	a agent. i ani
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OFFICER OR DIRECTOR GALVAN 4/23/96 904-837-4415 SIGNATURE: