

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000023587

FILED  
Apr 06, 2005  
Secretary of State

Entity Name: DOCTOR'S SKIN CARE INTERNATIONAL, INC.

## Current Principal Place of Business:

1480 NORTH UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071

## New Principal Place of Business:

## Current Mailing Address:

C/O BARBARA WALLACH  
10147 VESTAL CT  
CORAL SPRINGS, FL 330715830 US

## New Mailing Address:

FEI Number: 65-0481678

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALLACH, BARBARA  
10147 VESTAL CT.  
CORAL SPRINGS, FL 33071 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WALLACH, BARBARA  
Address: 1480 NORTH UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P ( ) Delete  
Name: WALLACH, PETER M  
Address: 10147 VESTAL CT  
City-St-Zip: CORAL SPRINGS, FL 33071

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WALLACH, BARBARA S  
Address: 1480 NORTH UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA S WALLACH

D

04/06/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date