FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000094072 (3)

AESTHETIC FX, INC.

Principal Place of Business

FILED Jan 21 1998 8:00am Secretary of State



City & State 23 NADIGS, FI.	28. Mailing Address 26 3975 Suite, Apt. #, etc.	S II A	01/01/1995 4. FEI Number	
City & State 23 NAMES, FI.	⊢	31,14,1-1	65-0555408 5. Certificate of Status Desired	Applied For Not Applicable \$8.75 Additional
	City & State	FI.	S. Election Campaign Financing Trust Fund Contribution	Fee Required \$5.00 May Be Added to Fees
Zip Country 24 34103 25 USA 9, Name and Address of Current F	29 84103 Registered Agent	30 USA	This corporation owes or has paid the Personal Property Tax due June 30. Name and Address of New Register	Yes 🗌 No
BLACKWELL, LAURA J 3884 PROGRESS AVENUE NAPLES FL 33942 11. Pursuant to the provisions of Sections 607,0502	and 607.1508, Florida Statut	81 Name 82 Street Add 83 B4 City es, the above-named core		FL 85 Zip Code 3 Sto3 se of changing its registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligation SIGNATURE Signature, typed or printed name of registered agent.	Florida. Such change was a cons of, Section 607,0505, Floring and little if applicable. (NOII	authorized by the corpora orida Statutes F Registered Agent signature requi	tion's board of directors. I neteby accept the	, 5 , 1998
12. OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE D NAME BLACKWELL, LAURA J STREET ADDRESS 3884 PROGERSS AVENUE CITY-ST-ZIP NAPLES FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	HACKWELL, LAURA J. 1975 1012 St. N. 21	Change
CITY-ST-ZIP NAPLES FL TITLE NAME STREET ADDRESS	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ DELETE	2 4 CITY-ST-ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ DELETE	3.4. DITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	☐ DELET e	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 YITLE 6.2 NAME		Change Addition
STREET ADDRESS CiTY-ST-ZIP 14. I hereby certify that the information supplied with indicated on this annual report or supplemental annual report.	this filing does not qualify for	6.3 STREET ADDRESS 6.4 CITY-ST-ZIP or the exemption stated in	Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information