

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P95000011825

1. Entity Name
MODEL PERFECT, INC



Principal Place of Business
3389 SHERIDAN ST
#328
HOLLYWOOD, FL 33021

Mailing Address
2385 RIVERLANE TERRACE
FORT LAUDERDALE, FL 33312

DO NOT WRITE IN THIS SPACE



01222008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0556757	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MCMILLAN, ELIZABETH
2385 RIVERLANE TERRACE
FORT LAUDERDALE, FL 33312

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**000000919156
05/13/08-80112-002 150.00**

10.

OFFICERS AND DIRECTORS

TITLE	D
NAME	MCMILLAN, ELIZABETH
STREET ADDRESS	2385 RIVERLANE TERRACE
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312

TITLE	
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CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Elizabeth Saraceno McMillan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(954-554-9489)

ELIZABETH SARACENO MCMILLAN

4-21-08

**FILED
Apr 24, 2008 08:00 AM
Secretary of State**