2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2012
Secretary of State

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Entity Name: BOCA DERMATOLOGY AND COSMETIC SURGERY CENTER, INC.

Current Principal Place of Business:

4601 NORTH FEDERAL HWY
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

5250 BOCA MARINA CIR S
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0655671 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARRELL, JAMES A
250 S AUSTRALIAN AVENUE
SUITE 500
PALM BEACH, FL 33401 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

OFFICERS AND DIRECTORS:

Title: DR
Name: RAE, VIRGINIA M.D.
Address: 5250 BOCA MARINA CIR S
City-St-Zip: BOCA RATON, FL 33487

Title: STD
Name: POTTER, ED
Address: 5250 BOCA MARINA CIR S
City-St-Zip: BOCA RATON, FL 33487

I hereby 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 all other like empowered.

SIGNATURE: ED POTTER STD 01/08/2012

Electronic Signature of Signing Officer or Director Date