

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

FILED

Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P6000073164
 1. Corporation Name **VMB's Electrolysis & Skin Care, Inc.**

Principal Place of Business Mailing Address
877 Conklin Court 800 Westwood Square
Casselberry, FL 32707 Suite D
Oviedo, FL 32765

3. Date Incorporated or Qualified 09/04/96	3a. Date of Last Report N/A
4. FEI Number 59-3397671	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 800 Westwood Square	2a. Mailing Address 26 800 Westwood Square
Suite, Apt. #, etc. 22 Suite D	Suite, Apt. #, etc. 27 Suite D
City & State 23 Oviedo, Florida	City & State 28 Oviedo, Florida
Zip 24 32765	Country 25 Seminole
29 32765	30 USA

9. Name and Address of Current Registered Agent
AmeriLawyer
3623 West Kennedy Boulevard
Tampa, FL 33609

81 Name Rose Mary G. Rivero
82 Street Address (P.O. Box Number is Not Acceptable) 2000 SAN MARINO WAY, S.
83
84 City CLEARWATER
85 Zip Code FL 34623

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **Rose Mary Rivero** DATE **3/8/97**
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-electing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

President
Vincentina M. Buzzetti
877 Conklin Court
Casselberry, FL 32707
Secretary
Vincentina M. Buzzetti
877 Conklin Court
Casselberry, FL 32707
Treasurer
Vincentina M. Buzzetti
877 Conklin Court
Casselberry, FL 32707
Director of Corporation
Vincentina M. Buzzetti
877 Conklin Court
Casselberry, FL 32707

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Vincentina M. Buzzetti** President **04-10-97** **407-696-676**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
VINCENTINA M. Buzzetti President

CR2E034 (9/96)