


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 25, 2005 8:00 am**  
**Secretary of State**

04-25-2005 90303 040 \*\*\*150.00

<b>DOCUMENT #</b> P97000023645	
<b>1. Entity Name</b> Dermascribe Industries, Inc.	

**DO NOT WRITE IN THIS SPACE**

**50043511**

<b>2. Principal Place of Business</b> 4551 Summit Blvd.	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>City &amp; State</b> West Palm Beach, FL	<b>City &amp; State</b>
<b>Zip</b> 33415	<b>Country</b> US

DO NOT WRITE IN THIS SPACE

<b>4. FEI Number</b> 65-0734668	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

<b>DO NOT WRITE IN THIS SPACE</b>	<b>7. Name and Address of Current Registered Agent</b>	
	Name <b>James Hawkins</b>	
	Street Address (P.O. Box Number is Not Acceptable) <b>4551 Summit Blvd.</b>	
	City <b>West Palm Beach</b>	FL Zip Code <b>33415</b>

<b>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.</b>	
SIGNATURE <i>James Hawkins</i> <b>president</b>	DATE <b>04-05-05</b>

<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Florida Department of State</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution: <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>10. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b>	<b>NAME</b>	<b>TITLE</b>	<b>NAME</b>
<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>
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<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>
<b>TITLE</b>	<b>NAME</b>	<b>TITLE</b>	<b>NAME</b>
<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>	<b>STREET ADDRESS</b>
<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>	<b>CITY-ST-ZIP</b>

**DO NOT WRITE IN THIS SPACE**

<b>12. 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 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 on an attachment with an address, with all other like empowered.</b>			
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<b>SIGNATURE:</b> <i>James Hawkins</i>	<b>James Hawkins</b>	<b>04-05-05</b>	<b>954-472-3124</b>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	<small>Daytime Phone #</small>

CR2E034B (12/02)

ATTACHMENT

# 097000023645-

For Value Received, 50043.571 hereby sell, assign and transfer  
unto James Hankins  
ONE THOUSAND AND 00/100 Shares

represented by the within Certificate, and do hereby irrevocably  
constitute and appoint  
**DERMASCIBE INDUSTRIES INC. (President)** Attorney  
to transfer the said Shares on the books of the within named  
Corporation with full power of substitution in the premises.

Dated 8/1/04

In presence of

Gladys Campo

GLADYS CAMPO

NOTICE: THE SIGNATURE OF THIS ASSIGNMENT  
MUST CORRESPOND WITH THE NAME AS WRITTEN UPON THE  
FACE OF THE CERTIFICATE, IN EVERY PARTICULAR, WITHOUT  
ALTERATION OR ENLARGEMENT OF ANY CHANGE WHATSOEVER.

The security features listed below, exceed industry guidelines

- Optically dead • Bleach reactivity • Polar class solvent (approx. 30 solvents) reactivity • blue stain • Non-polar class solvent (approx. 35 solvents) reactivity
- blue / black stain • Acid reaction • pink stain • Base reaction • blue green stain • Invisible embedded fiber • Fluorescent yellow • 2 visible embedded fibers •
- green and red • True paper machine watermark • True security level toner anchorage for laser printing • Void pentagraph background • High resolution border

Absence of these features may indicate alteration.

4-20-05

ATTACHMENT  
#P97000023645  
58043511

I, JAMES HAWKINS AM THE SOLE  
OFFICER AND SIGNER FOR DERMASCRIBE  
INDUSTRIES INC. AS OF AUG. 1, 2004.

I AM SORRY, I FAILED TO NOTIFY  
THE SECRETARY OF STATE OF THE  
CHANGE. PLEASE CONTACT ME IF  
THERE IS SOMTHING I HAVE MISSED.

THANK YOU.

DERMASCRIBE INDUSTRIES INC.

PRESIDENT: JAMES HAWKINS

CELL# 561-255-6341  
OUTRAGEOUS TATTOOS

561-683-4134 FAX# 561-432-7633

*James Hawkins*