

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000078931

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** NATIONAL COSMETIC LASER CENTER, INC.

**Current Principal Place of Business:**

742 SOUTH US 1  
COCOA, FL 32922

**New Principal Place of Business:**

1356 HERITAGE ACRES BLVD  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

PO BOX 560977  
ROCKLEDGE, FL 32956

**New Mailing Address:**

1356 HERITAGE ACRES BLVD  
ROCKLEDGE, FL 32955

**FEI Number:** 65-0822500

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSS, JACK A  
742 SOUTH US1  
COCOA, FL 32922 US

**Name and Address of New Registered Agent:**

ROSS, JACK A  
1356 HERITAGE ACRES BLVD  
ROCKLEDGE, FL 32955 US

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:** JACK A ROSS

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ROSS, JACK  
**Address:** 1356 HERITAGE ACRES BLVD  
**City-St-Zip:** ROCKLEDGE, FL 32955

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:** JACK A ROSS

MGR

04/30/2012

Electronic Signature of Signing Officer or Director

Date