

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000010970

**FILED**  
**Jun 12, 2012**  
**Secretary of State**

**Entity Name:** NICOL INTERNATIONAL PERMANENT COSMETIC INSTITUTE, INC.

**Current Principal Place of Business:**

1015 WEST INDIANTOWN RD.  
SUITE 201  
JUPITER, FL 33458

**New Principal Place of Business:**

**Current Mailing Address:**

3478 LANTERN BAY DRIVE  
JUPITER, FL 33477

**New Mailing Address:**

**FEI Number:** 65-0812386

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NICOL, MICHELE  
3478 LANTERN BAY DRIVE  
JUPITER, FL 33477 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: PSTD  
Name: NICOL, MICHELE  
Address: 3478 LANTERN BAY DRIVE  
City-St-Zip: JUPITER, FL 33477

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: MICHELE NICOL

PSTD

06/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date