

FILED
May 12, 2003 8:00 am
Secretary of State

05-12-2003 90227 020 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000048891		80118981	
1. Entity Name MAES SKIN CARE, INC.			
Principal Place of Business 8501 GRAND CANAL DRIVE MIAMI, FL 33144		Mailing Address 8501 GRAND CANAL DRIVE MIAMI, FL 33144	
2. Principal Place of Business		3. Mailing Address 7871 SW 152 Ave Unit 1301	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Unit 1301	
City & State		City & State Miami FL	
Zip	Country	Zip 33193	Country
4. FEI Number 65-0839998		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ESTRADA, MARIA 8501 GRAND CANAL DR MIAMI, FL 33144		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)</small>			
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE V	NAME RAMIREZ, MONICA	<input type="checkbox"/> Delete	
STREET ADDRESS 8501 GRAND CANAL DRIVE	CITY-ST-ZIP MIAMI, FL 33144		
TITLE SD	NAME ESTRADA, MARIA D	<input type="checkbox"/> Delete	
STREET ADDRESS 8501 GRAND CANAL DRIVE	CITY-ST-ZIP MIAMI, FL 33144		
TITLE T	NAME RAMIREZ, ANDREW	<input type="checkbox"/> Delete	
STREET ADDRESS 8501 GRAND CANAL DRIVE	CITY-ST-ZIP MIAMI, FL 33144		
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	CITY-ST-ZIP 		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE 	NAME Ramirez Monica	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	CITY-ST-ZIP 7871 SW 152 Ave Unit 1301 Miami FL 33193		
TITLE 	NAME Maria del Carmen Estrada	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	CITY-ST-ZIP 7871 SW 152 Avenue Unit 1301 Miami FL 33193		
TITLE 	NAME Ramirez Andrew	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	CITY-ST-ZIP 7871 SW 152 Avenue Unit 1301 Miami FL 33193		
TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	CITY-ST-ZIP 		
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Maria del Carmen Estrada</i>		05/08/03	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	

CR-ECS4 (10/02)

Attachment
8011898.D

Miami, Florida 05/01/03

To whom it may concern:

Re: Document: # 98000048891

FEI Number: 65-0839998

As per my conversation with one of your representatives I write this letter so as to ask that a late fee that is added to the regular annual fee of \$150.00 be excused.

The principal place of business address was changed when we moved the business back in January 2003. We completed a forwarding address form with the US Postal Service so as to assure the appropriate delivery of all correspondence to the new address but to no avail this very important document was never forwarded due to the explanation from your representative that this type of legal mail does not get forwarded.

Please accept my sincere apology on this matter and let it be known that we will monitor more carefully this annual occurrence.

Thank you very much for your consideration

Maria del Carmen Estrada

Maria Estrada
Registered Agent