

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000061739

Entity Name: LASER SKIN SOLUTIONS, INC.

FILED
Sep 10, 2006
Secretary of State

Current Principal Place of Business:

4671 S CONGRESS AVE SUITE 100-A
LAKE WORTH, FL 33461

Current Mailing Address:

4671 S CONGRESS AVE SUITE 100-A
LAKE WORTH, FL 33461

New Principal Place of Business:

4671 S CONGRESS AVE
SUITE 100-A
LAKE WORTH, FL 33461

New Mailing Address:

4671 S CONGRESS AVE
SUITE 100-A
LAKE WORTH, FL 33461

FEI Number: 65-0933008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUB, MARTA L
698 NORTH ISLAND
GOLDEN BEACH, FL 33160 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEDERMAN, KAREN
Address: 4671 S CONGRESS AVE SUITE 100-A
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: LEDERMAN, SAMUEL
Address: 4671 S CONGRESS AVE SUITE 100-A
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change () Addition
Name: LEDERMAN, KAREN
Address: 207 ALMERIA ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DR (X) Change () Addition
Name: LEDERMAN, SAMUEL
Address: 207 ALMERIA ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PRESIDENT/KAREN LEDERMAN

MS

09/10/2006

Electronic Signature of Signing Officer or Director

Date