**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 15, 2021**
**Secretary of State**
**9042801760CC**

DOCUMENT# P05000085552

**Entity Name:** I.I. COSMETIC INSTITUTE, INC.

**Current Principal Place of Business:**

1 NORTH DALE MABRY HWY, SUITE 1200
TAMPA, FL

**Current Mailing Address:**

1 NORTH DALE MABRY HWY, SUITE 1200
TAMPA, FL US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired:** No

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

STROTHMAN, NICOLE
ONE NORTH DALE MABRY HIGHWAY
SUITE 1200
TAMPA, FL 33609 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: NICOLE STROTHMAN 04/15/2021

Electronic Signature of Registered Agent — Date

**Officer/Director Detail :**

| | | | |
|---|---|---|---|
| Title | DIRECTOR | Title | GENERAL COUNSEL |
| Name | PROKUPEK, DAVID | Name | STROTHMAN, NICOLE |
| Address | ONE NORTH DALE MABRY HIGHWAY SUITE 1200 | Address | ONE NORTH DALE MABRY HIGHWAY SUITE 1200 |
| City-State-Zip: | TAMPA FL 33609 | City-State-Zip: | TAMPA FL 33609 |
| Title | PRESIDENT | Title | CHIEF ACCOUNTING OFFICER |
| Name | BERK, RYAN | Name | EYERMAN, KEVIN |
| Address | ONE NORTH DALE MABRY HIGHWAY SUITE 1200 | Address | ONE NORTH DALE MABRY HIGHWAY SUITE 1200 |
| City-State-Zip: | TAMPA FL 33609 | City-State-Zip: | TAMPA FL 33609 |

*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: NICOLE STROTHMAN GENERAL COUNSEL, SECRETARY, BY DINA IRIZARRY ATTORNEY-IN-FACT 04/15/2021

Electronic Signature of Signing Officer/Director Detail — Date