

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000095903

**Entity Name:** GOOD SKIN & HEALTH SOLUTIONS INC.

**Current Principal Place of Business:**

921 E 9TH STREET  
HIALEAH, FL 33010

**Current Mailing Address:**

921 E 9TH STREET  
HIALEAH, FL 33010 US

**FEI Number: 27-4279123**

**Certificate of Status Desired: No**

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

MARTINEZ, DENNIS  
921 E 9TH STREET  
HIALEAH, FL 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MARTINEZ, DENNIS  
Address 921 E 9TH STREET  
City-State-Zip: HIALEAH FL 33010

Title MGR  
Name MARTINEZ, CARIDAD  
Address 921 E 9TH STREET  
City-State-Zip: HIALEAH FL 33010

Title MGR  
Name MARTINEZ, DAVID  
Address 921 E 9TH STREET  
City-State-Zip: HIALEAH FL 33010

*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: DENNIS MARTINEZ**

**PRESIDENT**

**04/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date