

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000048446

Entity Name: DERMARTHERAPY INC.

Current Principal Place of Business:

4800 NW 102 AVENUE
SUITE 203
DORAL, FL 33178

Current Mailing Address:

4800 NW 102 AVENUE
SUITE 203
DORAL, FL 33178

FEI Number: 46-2996562

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOPEZ, DORIS
8012 NW 29 STREET
MIAMI, FL 33122 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: DORIS LOPEZ

04/30/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name RAMIREZ, MARIA R
Address 4800 NW 102 AVENUE SUITE 203
City-State-Zip: DORAL FL 33178

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: MARIA REBECA RAMIREZ

PRESIDENT

04/30/2016

Electronic Signature of Signing Officer/Director Detail

Date