

# **INVESTOR VERSION**

## **The Ayoob Aesthetic Empire**

### **Investor Overview + Use of Funds (Contact-Ready)**

#### **Executive Summary**

**The Ayoob Aesthetic Empire** is a vertically integrated, IP-driven medical aesthetics platform operating under **The House Call Beauty Corporation (HCBC)**. The ecosystem combines:

1. **High-margin concierge clinical services** (SF/LA),
2. **A flagship institute** (clinic + academy + media HQ),
3. **Elite injector education** (AAMA),
4. **A future licensing/certification network**,
5. **A planned supply company**, and
6. **Long-term laser + regenerative/cadaveric sciences** (separate entity).

This is designed to scale through **repeatable systems + owned IP + education-to-licensing conversion**, rather than a single-location med spa model.

**Positioning:** *Not a med spa. An institution, ecosystem, and legacy platform.*

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## **Founder**

### **Tanner Ayoob**

Master Injector | Advanced Medical Aesthetic Practitioner | Aesthetic Training Specialist | CEO | Philanthropist

- Internationally (South Korea, Japan, Taiwan, China, Manchester, & Italy) and domestically trained

- 7+ years clinical hands on experience, and expertise in procedures and treatments rarely found to be performed in the US due to fear, misinformation, perceived danger, and lack of educational institutes teaching such procedures and techniques.
- **127+ certifications (U.S. & abroad)**
- **6 Week Internship with Dr. Jungso Kim, and training from some of the leading, most iconic aesthetic providers in the world Dr. Patrick Treacy & Dr. Tim Pearce.**
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- **195+ advanced procedures performed** (injectable + non-surgical + surgical exposure)
- Surgical exposure includes: non-incisional double eyelid, silicone nasal implant placement, assisting autologous fat graft processing, penile augmentation, labiaplasty breast augmentation with Hyaluronic Acid dermal filler, and much more
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- The House Call Beauty has been successfully opened and running for 3 years straight. While specific statistics for California are not available, general industry data suggests that approximately 45% of new med spas fail nationwide within their first five years of operation

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## Market Problem

The aesthetics and injector education market is large—but structurally broken:

- “Training” is often inconsistent, mannequin-based, or hotel-ballroom quality
- Safety standards vary widely; outcomes are commoditized
- Providers lack defensible differentiation beyond pricing
- No institutional pipeline linking **training** → **standards** → **certification** → **brand affiliation** → **ongoing renewals**

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## The Solution

A unified platform that produces revenue from the *same clinical engine* in multiple ways:

- **Clinical care** (concierge + flagship)
  - **Education** (in-person intensives + hybrid/online)
  - **Content/media** (owned technique library)
  - **Licensing/certification** (renewals + territory exclusivity)
  - **Supply chain leverage** (injector-only distribution)
  - **Future laser institute** (insurance + private pay)
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## Core Revenue Engines

### 1) Concierge Clinical Revenue (Active)

**The House Call Beauty®:** luxury concierge injectables (homes, hotels, offices, events, corporate bookings)

- Neuromodulators, dermal fillers, NSR, facial balancing, sclerotherapy, combination therapies
- Includes proprietary clinical standards: **Ayoob Sterility & Infection Control Protocol™** (zero infections in 3 years stated)

### 2) High-Repeat Neuromodulator Revenue (Active / Expandable)

**The Botox Concierge®:** neuromodulator-only model

- Botox/Dysport/Xeomin/Jeuveau/Daxxify/Letybo
- Tox banks + memberships
- Corporate wellness/events
- Alumni provider model (AAMA-trained clinicians under centralized standards)

### 3) Education Revenue (Active / Scalable)

### **The Ayoob Aesthetic Mastery Academy® (AAMA)**

- Foundational → Advanced → Master pathways
- Hands-on models + standardized curriculum + complication prevention
- Built for premium positioning (limited seats, founder-led IP)

### **4) Licensing + Certification Revenue (High-Margin Scale Layer)**

#### **Ayoob Certified Injector™ / Ayoob Master Injector™**

- Annual renewals + compliance requirements
- Territory-based exclusivity (future)
- Licensing for curriculum + brand use

### **5) Supply & Distribution (Planned)**

#### **Ayoob Aesthetic Supply Co.**

- Injector-only supply (cannulas, syringes, disposables, injectables)
- Private label expansion

### **6) Mobile Fleet Expansion (Planned)**

#### **The Ayoob Medical Carriage™ (Mercedes Sprinter mobile suite)**

- Premium pricing justified by discretion + convenience + medical-grade experience
- Fleet deployment model by metro with centralized training + standards

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## **Flagship: The Ayoob Aesthetic Center® (Primary Investment Thesis)**

A single location engineered to generate revenue as:

- Luxury clinic
- AAMA teaching institute
- Filming/content studio
- HQ + storage + supply fulfillment node
- Future laser / skincare integration

**Key value:** one space produces **patient revenue + tuition revenue + content/IP assets** simultaneously.

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## Expansion Roadmap

Phase I – California Core: San Francisco (HQ), Los Angeles, & Sacramento

Phase II – U.S.: Miami/Fort Lauderdale, NYC (Manhattan, Brooklyn, & The Hamptons), Las Vegas, Dallas, and Atlanta

Phase III – International: London, Milan/Rome, South Korea/Japan

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## Moat / Defensibility

- Founder-led **proprietary technique portfolio** (teachable + licensable)
  - Education pipeline that converts into **brand-affiliated provider network**
  - Standardized protocols, curriculum, content, and brand governance
  - Multi-revenue stacking from the same operational base
  - Entity and brand architecture built for **risk separation and licensing control**
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## Use of Funds

Capital is allocated to:

1. **Flagship lease + buildout** (clinic + classroom + filming zones)
  2. **Compliance + legal structuring** (clinic vs academy firewall, consents, insurance stack)
  3. **Filming infrastructure** (professional before/after + library production)
  4. **Curriculum + IP packaging** (codified course assets and licensing-ready materials)
  5. **Working capital** (first 6–9 months operations)
  6. **Key hires** (ops/admin, coordinator, inventory, marketing)
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## **Risk Mitigation (Investor-Comfort Section)**

- Structural separation: **clinical care vs education**
  - Clear student boundaries (observe/assist; inject only if licensed + legally permitted + supervised)
  - Robust consent + media release frameworks
  - Insurance stack per entity (malpractice, GL, education liability, media)
  - Standardized infection control and emergency protocols
  - Conservative expansion sequencing (prove SF → replicate LA → scale)
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**The Ask:** Seeking strategic capital and/or partners to secure the flagship institute and accelerate scale through education, licensing, and controlled multi-city expansion—without diluting brand authority or clinical standards.

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**Investor Attachments (Appendices Available On Request)**

- Brand architecture + DBAs vs legal entities
  - Trademark/IP priority map
  - AAMA course → licensing revenue map
  - Mobile fleet model (The Ayoob Medical Carriage™)
  - Nonprofit overview (arm's-length)
  - Confidential regenerative/cadaveric sciences concept (separate entity)
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