## 2005 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L04000008373

Entity Name: AMERICA BEAUTY L.L.C.

FILED Jun 07, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6103 NW 114 PL # 265 7505 NW 36 ST

DORAL, FL 33178 US MIAMI, FL 33166 US

Current Mailing Address: New Mailing Address:

6103 NW 114 PL # 265 7505 NW 36 ST

DORAL, FL 33178 US MIAMI, FL 33166 US

FEI Number: 20-0700648 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MELENDEZ VEGA, LLC 9010 SW 137 AVE SUITE 225 MIAMI, FL 33186 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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

 Title:
 MGR () Delete
 Title:
 MGR (X) Change () Addition

 Name:
 AGUDELO, DIANA P
 Name:
 SALA DE BELLEZA FRIS, UREN

 Address:
 6103 NW 114 PL # 265
 Address:
 7505 NW 36 ST

Address. 6 103 NW 114 PL # 265 Address. 7505 NW 56 ST City-St-Zip: DORAL, FL 33178 US City-St-Zip: MIAMI, FL 33166 US

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 JARAMILLO, ROA, MARIA CRISTINA
 Name:
 AGUDELO, NORA B

 Address:
 6103 NW 114 PL # 265
 Address:
 7505 NW 36 ST

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:
 MIAMI, FL 33166 US

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 SALA DE BELLEZA FRIS, UREN
 Name:

 Address:
 6103 NW 114 PL # 265
 Address:

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 AGUDELO, NORA B
 Name:

 Address:
 6103 NW 114 PL # 265
 Address:

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NORA B. AGUDELO MGR 06/07/2005