2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2006
Secretary of State

DOCUMENT# P02000111317

Entity Name: TEXTURED LEAF SALON AND DAY SPA, INC.

Current Principal Place of Business:

1610 ROUSE ROAD
ORLANDO, FL 32817

New Principal Place of Business:

1600 ROUSE ROAD
ORLANDO, FL 32825

Current Mailing Address:

1610 ROUSE ROAD
ORLANDO, FL 32817

New Mailing Address:

1600 ROUSE ROAD
ORLANDO, FL 32825

FEI Number: 51-0436250 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEAF, BETTY A
1610 ROUSE ROAD
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

LEAF, BETTY A
1600 ROUSE ROAD
ORLANDO, FL 32825 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: 01/03/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HARVEY, CHERYL R
Address: 11717 SAWYER STREET
City-St-Zip: ORLANDO, FL 32817

Title: VSTD ( ) Delete
Name: OSBORNE, BETTY A
Address: 986 TOMES CT
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEAF, BETTY A
Address: 1600 ROUSE RD.
City-St-Zip: ORLANDO, FL 32825

Title: VSTD (X) Change ( ) Addition
Name: LEAF, BETTY A
Address: 1600 ROUSE RD.
City-St-Zip: ORLANDO, FL 32825

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BETTY A. LEAF PD 01/03/2006
Electronic Signature of Signing Officer or Director — Date