

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000097357

FILED
Jan 18, 2008
Secretary of State

Entity Name: PARAMOUNT INSTITUTE OF HAIR, SKIN & NAILS, INC.

Current Principal Place of Business:

4943 U.S. HWY 98 N.
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2394
LAKELAND, FL 33806

New Mailing Address:

4943 U.S. HWY 98 N.
LAKELAND, FL 33809

FEI Number: 86-1080100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE TOTH, PETER P
4943 U.S. HWY. 98 N.
LAKELAND, FL 33809 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: DE TOTH, PETER P PRES
Address: 3520 CLEVELAND HEIGHTS BLVD.
City-St-Zip: LAKELAND, FL 33803

Title: V.P. () Delete
Name: SANTOS-DE TOTH, LOURDES V.P.
Address: 3520 CLEVELAND HEIGHTS BLVD.
City-St-Zip: LAKELAND, FL 33803

Title: SEC. () Delete
Name: SANTOS-DE TOTH, LOURDES SEC
Address: 3520 CLEVELAND HEIGHTS BLVD.
City-St-Zip: LAKELAND, FL 33803

Title: TRES () Delete
Name: DE TOTH, PETER P TRES
Address: 3520 CLEVELAND HEIGHTS BLVD.
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DE TOTH, PETER P PRES
Address: 4943 U.S. HWY 98 N.
City-St-Zip: LAKELAND, FL 33809

Title: V.P. (X) Change () Addition
Name: SANTOS-DE TOTH, LOURDES V.P.
Address: 4943 U.S. HWY 98 N.
City-St-Zip: LAKELAND, FL 33809

Title: SEC. (X) Change () Addition
Name: SANTOS-DE TOTH, LOURDES SEC
Address: 4943 U.S. HWY 98 N.
City-St-Zip: LAKELAND, FL 33809

Title: TRES (X) Change () Addition
Name: DE TOTH, PETER P TRES
Address: 4943 U.S. HWY 98 N.
City-St-Zip: LAKELAND, FL 33809

I hereby certify that the information supplied with this filing does not qualify 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: PETER P. DE TOTH

PRES

01/18/2008

Electronic Signature of Signing Officer or Director

_____ Date