

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102666

Entity Name: JINNY BEAUTY SUPPLY CO., INC.

FILED
Jul 14, 2005
Secretary of State

Current Principal Place of Business:

16241 NW 48TH AVENUE
HIALEAH, FL 330146438

New Principal Place of Business:

Current Mailing Address:

16241 NW 48TH AVENUE
HIALEAH, FL 330146438

New Mailing Address:

FEI Number: 20-0246025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAY, MARK W PA
GABIE ONE TOWER
1320 SOUTH DIXIE HWY - SUITE 870
MIAMI, FL 33146 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PATA, LARRY
Address: 16201 NW 48TH AVENUE
City-St-Zip: HIALEAH, FL 330146438

Title: D () Delete
Name: JHIN, EDDIE
Address: 4652 RIVER CT.
City-St-Zip: DULUTH, GA 30155

Title: D () Delete
Name: JHIN, TAE H
Address: ONE DUNSINANE LN
City-St-Zip: BANNOCKBURN, IL 60015

Title: D () Delete
Name: JHIN, ANN S
Address: ONE DUNSINANE LN
City-St-Zip: BANNOCKBURN, IL 60015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 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: LARRY PATA

D

07/14/2005

Electronic Signature of Signing Officer or Director

_____ Date