

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000087384

FILED  
Apr 20, 2007  
Secretary of State

Entity Name: FRINGE HAIR & NAIL DESIGNERS, INC.

## Current Principal Place of Business:

1140 E ALTAMONTE DR  
STE 1014  
ALTAMONTE SPRINGS, FL 32701 US

## New Principal Place of Business:

## Current Mailing Address:

1140 E ALTAMONTE DR  
STE 1014  
ALTAMONTE SPRINGS, FL 32701 US

## New Mailing Address:

FEI Number: 59-3282285

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWNE, ROSEMARIE  
439 SPRINGHOLLOW BLVD.  
APOPKA, FL 32712 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: P ( ) Delete  
Name: BROWNE, ROSEMARIE  
Address: 439 SPRING HOLLOW BLVD  
City-St-Zip: APOPKA, FL 32712

Title: VP ( ) Delete  
Name: O'LEARY, PETER F  
Address: SPRINGHOLLOW BLVD.  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ROSEMARIE BROWNE

P

04/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date