


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 08:00 AM
Secretary of State

□□□□□□□□ P98000073203 1. Entity Name ANNIE'S HAIR DESIGN CORP.	
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Principal Place of Business 2430 S.W. 137 AVE. MIAMI, FL 33175 US	Mailing Address 9192 CORAL WAY SUITE 201 MIAMI, FL 33165 US
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DO NOT WRITE IN THIS SPACE



03102006	STANDARD	000000000000
4. FEI Number 65-0859839	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75	

6. Name and Address of Current Registered Agent

BOTTEN, ANA MARGARITA
 2430 SOUTHWEST 137TH AVE.
 MIAMI, FL 33175

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$350.00

8. Election Campaign Financing Trust Fund Contribution. **\$5.00**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST BOTTEN, ANA MARGARITA 2430 SOUTHWEST 137TH AVE. MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOTTEN, ANA MARGARITA 2430 SOUTHWEST 137TH AVE. MIAMI, FL 33175
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 04/18/06-80019-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ana M. Botten* 3/27/06 305-235-3172
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #