FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000066561

1. Entity Name
TERRA HAIR SALON & SPA INC.

Principal Place of Business
6825 DAVIS BLVD
NAPLES, FL 34104-5322

Mailing Address
6825 DAVIS BLVD
NAPLES, FL 34104-5322

02252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
51-0508720
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GRAY, DELORES H
120 NAPA RIDGE WAY
NAPLES, FL 34119

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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

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PST
NAME	GRAY, DELORES H
STREET ADDRESS	120 NAPA RIDGE WAY
CITY-ST-ZIP	NAPLES, FL 34119
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/28/06-80010-018 150.00

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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: Delores H Gray

SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED TO SIGN

Title

Daytime Phone #