I hereby 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 all other like empowered.

SIGNATURE: JIEUN A SHYN

Electronic Signature of Signing Officer/Director Detail

Entity Name: CITY FASHION HUMAN HAIR SUPPLIES COMPANY

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

18200 NW 27 AVE. #A7 MIAMI, FL 33056

Current Mailing Address:

DOCUMENT# P93000007532

10917 N W 9 COURT PLANTATION, FL 33324

FEI Number: 65-0385441

Name and Address of Current Registered Agent:

SUNNYRIVER LLC 18200 N W 27 AVENUE A7 MIAMI GARDENS, FL 33056 US

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

Officer/Director Detail :

TitlePSTDNameSHYN, JIEUN AAddress10917 N W 9 COURTCity-State-Zip:PLANTATION FL 33324

FILED May 01, 2014 Secretary of State CC6401996473

Certificate of Status Desired: No

Date

05/01/2014 Date