

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 332789

FILED
Oct 18, 2005
Secretary of State

Entity Name: BEAUTY BRANDS GROUP, INC.

Current Principal Place of Business:

1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

% MARY F SEYMOUR
PO BOX 146
PEPIN, WI 54759

New Mailing Address:

FEI Number: 59-1213720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PETER SOUZA

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: DP () Delete
Name: JOHNSON, GREGORY
Address: 9666 RIGGES ROAD, PMB 106
City-St-Zip: SUN LAKES, AZ 85248 US

Title: DV () Delete
Name: HEIDMANN, ROBERT
Address: 852 WOODDALE ROAD
City-St-Zip: NISSWA, MN 56468 US

Title: DST () Delete
Name: PRICE, GLENNA
Address: 2114 50TH AVENUE
City-St-Zip: OSCEOLA, WI 54020 US

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:

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: GREGORY JOHNSON

DP

10/18/2005

Electronic Signature of Signing Officer or Director

Date