

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Mar 09, 2006 8:00 am
Secretary of State

02-17-2006 90070 049 ***150.00

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1st MOORE CR2E034 (10/05)

DOCUMENT # H61313 1. Entity Name HEADS WEST HAIR DESIGNS, INC.																																																																																																																																																											
Principal Place of Business 7158 S. BERACASA WAY BOCA RATON FL 33433			Mailing Address 7158 S. BERACASA WAY BOCA RATON FL 33433																																																																																																																																																								
2. Principal Place of Business		3. Mailing Address																																																																																																																																																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																																																									
City & State		City & State		4. FEI Number 59-2655737																																																																																																																																																							
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent HALL, RICHARD M. 3028 NW 26 CT. BOCA RATON FL 33434				7. Name and Address of New Registered Agent																																																																																																																																																							
				Name																																																																																																																																																							
				Street Address (P.O. Box Number is Not Acceptable)																																																																																																																																																							
				City FL Zip Code																																																																																																																																																							
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and use if applicable																																																																																																																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">DPT</td> <td style="width: 30%; text-align: right;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td>HALL, RICHARD M.</td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7158 S. BERACASA WAY</td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>BOCA RATON FL</td> <td></td> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td>CS</td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td>CATANZARO, VINCENT</td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td>7158 S. BERACASA WAY</td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>BOCA RATON FL</td> <td></td> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td colspan="2"></td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td colspan="2"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td colspan="2"></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> <td>CITY- ST- ZIP</td> <td colspan="2"></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	DPT	☐ Delete	TITLE			NAME	HALL, RICHARD M.		NAME			STREET ADDRESS	7158 S. BERACASA WAY		STREET ADDRESS			CITY- ST- ZIP	BOCA RATON FL		CITY- ST- ZIP			TITLE	CS	☐ Delete	TITLE			NAME	CATANZARO, VINCENT		NAME			STREET ADDRESS	7158 S. BERACASA WAY		STREET ADDRESS			CITY- ST- ZIP	BOCA RATON FL		CITY- ST- ZIP			TITLE		☐ Delete	TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP			TITLE		☐ Delete	TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP			TITLE		☐ Delete	TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP			TITLE		☐ Delete	TITLE			NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY- ST- ZIP			CITY- ST- ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: 3-7-06 561-3955583 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																																																											