2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# H93270

Entity Name: GULF COAST HAIR CARE, INC.

Current Principal Place of Business:

4408 DELWOOD LANE
PANAMA CITY BEACH, FL 32408 US

New Principal Place of Business:

4726 BAY POINT ROAD
SUITE #4208
PANAMA CITY BEACH, FL 32408 US

Current Mailing Address:

4408 DELWOOD LANE
PANAMA CITY BEACH, FL 32408 US

New Mailing Address:

P.O. BOX 27609
PANAMA CITY BEACH, FL 32411 US

FEI Number: 59-2638700 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLAAT, DAVID LOWELL
4408 DELWOOD LANE
PANAMA CITY BEACH, FL 32408 US

Name and Address of New Registered Agent:

FLAAT, DAVID LOWELL
4726 BAY POINT ROAD
SUITE #4208
PANAMA CITY BEACH, FL 32408 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: _____ 04/30/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FLAAT, DAVID LOWELL
Address: 322 WAHOO ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VP ( ) Delete
Name: FLAAT, LINDA MARIE
Address: 322 WAHOO ROAD
City-St-Zip: PANAMA CITY BEACH, FL 32408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: FLAAT, DAVID LOWELL
Address: 1421 TROUT DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VP (X) Change ( ) Addition
Name: FLAAT, LINDA MARIE
Address: 1421 TROUT DRIVE
City-St-Zip: PANAMA CITY BEACH, FL 32408

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID LOWELL FLAAT P 04/30/2007
Electronic Signature of Signing Officer or Director — Date