2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2004
Secretary of State

DOCUMENT# K70789

Entity Name: UNISEX GRACY'S & EL CLON SPA AND SALON CORP.

Current Principal Place of Business:

6789 S.W. 8 TH. STREET
MIAMI, FL 33144 US

New Principal Place of Business:

Current Mailing Address:

7191 S.W. 8 TH STREET
MIAMI, FL 33144 US

New Mailing Address:

6789 S.W. 8TH. SYTREET
MIAMI, FL 33144 US

FEI Number: 23-0334032 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REYES, LAZARO B
7140 SW 51TH ST
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

ROJAS, JOSE A
6789 S.W. 8TH. STREET
MIAMI, FL 33144 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: NORMA COBAS- ROJAS 10/06/2004
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: P ( ) Delete
Name: PUELLO, NORMA C
Address: 7140 SW 51TH ST
City-St-Zip: MIAMI, FL 33144

Title: VP ( ) Delete
Name: REYES, LAZARO B
Address: 7140 SW 51TH ST
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: COBAS-ROJAS, NORMA C
Address: 6789 S.W. 8TH STREET
City-St-Zip: MIAMI, FL 33144

Title: VP (X) Change ( ) Addition
Name: ROJAS, JOSE A
Address: 6789 S.W. 8TH. STREET
City-St-Zip: MIAMI, FL 33144

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: NORMA C. PUELLO P. 10/06/2004
Electronic Signature of Signing Officer or Director Date