2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2005
Secretary of State

DOCUMENT# L04000069206

Entity Name: BEAUTY CONCEPTS GROUP LLC

Current Principal Place of Business:

11767 NW 48TH STREET
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

11767 NW 48TH STREET
CORAL SPRINGS, FL 33076

New Mailing Address:

FEI Number: 20-1653784 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABRAHAM, KATHLEEN H
11767 NW 48TH STREET
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

ABRAHAM, KATHLEEN H PRES.
11767 NW 48TH STREET
CORAL SPRINGS, FL 33076 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: KATHLEEN H. ABRAHAM 04/12/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	ABRAHAM, JOHN	
Address:	11767 NW 48TH STREET	
City-St-Zip:	CORAL SPRINGS, FL 33076	
Title:	MGR	( ) Delete
Name:	ABRAHAM, KATHLEEN H	
Address:	11767 NW 48TH STREET	
City-St-Zip:	CORAL SPRINGS, FL 33076	
Title:	MGR	( ) Delete
Name:	STARNES, CHARLES D	
Address:	6820 NW 103RD TERRACE	
City-St-Zip:	PARKLAND, FL 33076	
Title:	MGR	( ) Delete
Name:	CAPELLA, LESLIE	
Address:	1820 NW 124TH WAY	
City-St-Zip:	CORAL SPRINGS, FL 33071	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KATHLEEN H. ABRAHAM PRES 04/12/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date