2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080841

FILED Jun 05, 2006 Secretary of State

Entity Name: GIORGIOS STUDIOS BEAUTY SALON, BARBER SHOP AND SPA, LLC

Current Principal Place of Business: New Principal Place of Business: 560 E OSCEOLA PARKWAY KISSIMMEE, FL 34744 **Current Mailing Address: New Mailing Address:** 560 E OSCEOLA PARKWAY KISSIMMEE, FL 34744 FEI Number: 20-1990345 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SILVA, CLAUDIA 560 E. OSCEOLA PARKWAY KISSIMMEE, FL 34744 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition DE RODRIGUEZ, NANCY ALVAREZ Name: Name: Address: CARACAS Address: City-St-Zip: VENEZUELA. City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SILVA, CLAUDIA Name: Address: C/O 560 E OSCEOLA PARKWAY Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RODRIGUEZ, JORGE Name: Name: C/O 560 E OSCEOLA PARKWAY Address: Address: City-St-Zip: KISSIMMEE, FL 34744 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CLAUDIA SILVA MGRM 06/05/2006