

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M37711

FILED
Jan 21, 2005
Secretary of State

Entity Name: THE FOUR HAIR DESIGNERS, INC.

Current Principal Place of Business:

9345 S.W. 40TH ST.
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9345 S.W. 40TH ST.
MIAMI, FL 33165

New Mailing Address:

FEI Number: 59-2717919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALDANA, AIDA
9345 SW 40 ST.
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FERBEYRE, ANTONIO E.,
Address: 9345 SW 40 ST.
City-St-Zip: MIAMI, FL

Title: DS () Delete
Name: CAPIN, NORMA,
Address: 9345 SW 40 ST.
City-St-Zip: MIAMI, FL

Title: DT () Delete
Name: VALDIVIA, MAGALY,
Address: 9345 SW 40 ST.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: HERNANDEZ, EMILY,
Address: 9345 SW 30 ST.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: AIDA, ALDANA
Address: 9345 S.W. 40TH ST.
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: FERBEYRE, ANTONIO E
Address: 9345 SW 40TH. ST.
City-St-Zip: MIAMI, FL 33165

Title: DS (X) Change () Addition
Name: CAPIN, NORMA
Address: 9345 SW 40TH. ST.
City-St-Zip: MIAMI, FL 33165

Title: DT (X) Change () Addition
Name: VALDIVIA, MAGALY
Address: 9345 SW 40TH. ST.
City-St-Zip: MIAMI, FL 33165

Title: D (X) Change () Addition
Name: HERNANDEZ, EMELY
Address: 9345 SW 40TH. ST.
City-St-Zip: MIAMI, FL 33165

Title: D (X) Change () Addition
Name: ALDANA, AIDA
Address: 9345 S.W. 40TH. ST.
City-St-Zip: MIAMI, FL 33165

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: AIDA ALDANA

D

01/21/2005

Electronic Signature of Signing Officer or Director

Date