2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000004112

1. Entity Name
ANGEL'S BEAUTY SUPPLY, INC.

Principal Place of Business	Mailing Address
5944 34 STREET NORTH STE 32 & 33 ST PETERSBURG, FL 33714	5944 34 STREET NORTH STE 32 & 33 ST PETERSBURG, FL 33714

DO NOT WRITE IN THIS SPACE

03212006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3707459

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

VAN NGUYEN, BINH
5944 34 STREET NORTH STE 32 & 33
ST PETERSBURG, FL 33714

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	M
NAME	NGUYEN, BINH VAN
STREET ADDRESS	5944 34 STREET NORTH STE 32 & 33
CITY-ST-ZIP	ST PETERSBURG, FL 33714
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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04/11/06-80085-007 158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ MAR 24-06 (727) 520 9091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #