

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007469

FILED
Feb 28, 2005
Secretary of State

Entity Name: TYLAH'S HEALTHY HAIR CARE SPA, INC.

Current Principal Place of Business:

230 S CYPRESS RD, SUITE B
POMPAHO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

1201 NW 9TH TERR
FT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0975119

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETHEL, DEBRA M
1201 NW 9TH TERR
FT LAUDERDALE, FL 33311 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: P () Delete
Name: BETHEL, DEBRA M
Address: 1201 NW 9TH TERR.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: V () Delete
Name: BETHEL, DUNCAN
Address: 1201 NW 9TH TERR.
City-St-Zip: FT. LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DEBRA M. BETHEL

PRES

02/28/2005

Electronic Signature of Signing Officer or Director

Date