

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P00000035662

Entity Name: HAIR TRENDS INC.

**FILED**  
**Nov 30, 2004**  
**Secretary of State**

**Current Principal Place of Business:**

10680 SW 24 ST  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

820 NW 39 CT  
MIAMI, FL 33126

**New Mailing Address:**

10680 SW 24 ST  
MIAMI, FL 33165

FEI Number: 65-1124784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FELIPE, ALFREDO  
820 NW 39TH CT.  
MIAMI, FL 33126 US

**Name and Address of New Registered Agent:**

FELIPE, ALFREDO  
10680 SW 24 ST  
MIAMI, FL 33165 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: ALFREDO FELIPE

11/30/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: OWN ( ) Delete  
Name: FELIPE, ALFREDO  
Address: 10680 SW 24 ST  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ALFREDO FELIPE

PRES

11/30/2004

Electronic Signature of Signing Officer or Director

Date