

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 06, 2005  
Secretary of State**

DOCUMENT# P00000057241

Entity Name: EXQUISITE BARBER & BEAUTY SALON, INC.

**Current Principal Place of Business:**

16768 NE 2ND AVE.  
NORTH MIAMI, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

16768 NE 2ND AVE.  
NORTH MIAMI, FL 33162

**New Mailing Address:**

FEI Number: 65-1017847      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PURCELL, EGBERT  
1246 NE 110 TERR  
MIAMI, FL 33161      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: EGBERT PURCELL

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: P      ( ) Delete  
Name: PURCELL, EGBERT  
Address: 1246 NE 110 TERR  
City-St-Zip: MIAMI, FL 33161

Title: S      ( ) Delete  
Name: PURCELL, JASON A  
Address: 660 NW 177ST APT 130  
City-St-Zip: MIAMI, FL 33169

Title: D      ( ) Delete  
Name: PURCELL, JACQUILINE  
Address: 25 NW 151ST ST.  
City-St-Zip: NORTH MIAMI, FL 33169

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: EGBERT PURCELL

Electronic Signature of Signing Officer or Director

PRE

10/06/2005

Date