

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004636

FILED  
Apr 06, 2004  
Secretary of State

Entity Name: HAIR GALLERY OF NAPLES, INC.

## Current Principal Place of Business:

2010 MORNING SUN LANE  
NAPLES, FL 34119

## New Principal Place of Business:

8849 TAMiami TRAIL NORTH  
NAPLES, FL 34108

## Current Mailing Address:

P.O. BOX 110736  
NAPLES, FL 34106

## New Mailing Address:

FEI Number: 59-3693324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERGUSON, MARIA  
2010 MORNING SUN LANE  
NAPLES, FL 34119

## Name and Address of New Registered Agent:

FERGUSON, MARIA  
13100 BRIDGEFORD AVE  
BONITA SPRINGS, FL 34135

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: MARIA J. FERGUSON

04/06/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FERGUSON, MARIA  
Address: 2010 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FERGUSON, MARIA  
Address: 13100 BRIDGEFORD AVE  
City-St-Zip: BONITA SPRINGS, FL 34135

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: MARIA J. FERGUSON

PRES

04/06/2004

Electronic Signature of Signing Officer or Director

Date