

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036591

FILED
Apr 19, 2005
Secretary of State

Entity Name: MARQUISE HAIR DESIGN, INC.

Current Principal Place of Business:

407 SE MIZNER BLVD.
SUITE 70
BOCA RATON, FL 33432 US

Current Mailing Address:

5288 BUCKHEAD CIRCLE
BOCA RATON, FL 33486 US

New Principal Place of Business:

310 ESPLANADE
SUITE 50
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 04-1600173 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARSHESKI, THERESA M
5288 BUCKHEAD CIRCLE
BOCA RATON, FL 33486 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: PD () Delete
Name: MARSHESKI, THERESA M
Address: 407 SE MIZNER BLVD. SUITE 70
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARSHESKI, THERESA M
Address: 310 ESPLANADE SUITE 50
City-St-Zip: BOCA RATON, FL 33432 US

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: THERESA MARSHESKI

PD

04/19/2005

Electronic Signature of Signing Officer or Director

_____ Date