2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2005 08:00 AN

DOCUMENT # P01000038017 1. Entity Name DEBBIE WILSON @ AHEAD OF TIMES SALON, INC.					Seci	retary of State	
Principal Place of Business Mailing Address 3809 72ND AVE TERRACE EAST 3809 72ND AVE TERRACE EAST SARASOTA, FL 34243 SARASOTA, FL 34243			ī	Total Control			
DO NOT WRITE IN THIS SPAC				02282005 No Chg-P CR2E034 (10/03) 4. FEI Number			
6. Name and Address of Current Registered Agent WILSON, DEBRA 3809 72ND AVE TERRACE EAST SARASOTA, FL 34243				DO NOT WRITE IN THIS SPACE			
the obligated SIGNATURE.	Signature, typed or printed name of registered agent and		d Agent signature requ	stered agent, or bound when reinstating) 55.00 May Be		DAJE	
After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution.				dded to Fees	U00000: 05/02/05-	351489 80147-004 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, DEBRA 3809 72ND AVE TERRACE EAST SARASOTA, FL 34243	RECTORS				- 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
NAME Street address City-St-Zip			DO NOT WRITE IN THIS SPACE				
NAME STREET ADDRESS CITY-ST-ZIP				III	I MID SF	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							

12. I hereby certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Deben Wilson Daytime Phone #