

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000059679

FILED
Apr 28, 2003
Secretary of State

Entity Name: THE BEAUTY SUPPLY WAREHOUSE, INC.

Current Principal Place of Business:

2121 N STATE ROAD 7
LAUDERHILL, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

2121 N STATE ROAD 7
LAUDERHILL, FL 33313 US

New Mailing Address:

FEI Number: 65-1115154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANIHANI, AHMAD
2121 N STATE ROAD 7
LAUDERHILL, FL 33313 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: PSD () Delete
Name: BANIHANI, AHMAD
Address: 2121 N STATE ROAD 7
City-St-Zip: LAUDERHILL, FL 33313

Title: VTC () Delete
Name: BANYHANY, MUHAMED
Address: 18130 NORTHWEST 2ND AVE
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTC (X) Change () Addition
Name: BANYHANY, MUHAMED
Address: 2121 N. STATE ROAD 7
City-St-Zip: LAUDERHILL, FL 33313

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: MUHAMED BANYHANY

VTC

04/28/2003

Electronic Signature of Signing Officer or Director

_____ Date