


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 28, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P01000088684</b> 1. Entity Name PRETTY & PINK BEAUTY SALON CORP.	
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Principal Place of Business 621 SW 57 AVE MIAMI, FL 33144	Mailing Address 621 SW 57 AVE MIAMI, FL 33144
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**DO NOT WRITE IN THIS SPACE**



01212004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1138331	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  PINEIRO, CARMEN E 6101 SW 17TH ST MIAMI, FL 33155	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PINEIRO, CARMEN E 6101 SW 17TH ST MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MEDINA, CARMEN 6101 SW 17TH ST MIAMI, FL 33155
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01/28/04-80077-011 150.00

**DO NOT WRITE  
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** Carmen Pineiro Carmen Pineiro 1-20-04 305-266  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 4004