2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000003466

Entity Name: BELLA BELLA SALON INC.

FILED Nov 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

15280 JOG ROAD

SUITE I

DELRAY BEACH, FL 33484

Current Mailing Address: New Mailing Address:

133 N POMPARO BCH BLVD 15280 JOG ROAD

#308 SUITE I

POMPANO BEACH, FL 33062 DELRAY BEACH, FL 33484

FEI Number: 01-0569464 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PERES, POLA
133 N POMPANO BCH BLVD
PERES, POLA
15280 JOG ROAD

#308 SUITE I

POMPANO BEACH, FL 33062 US DELRAY BEACH, FL 33484 US

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: POLA PERES 11/03/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:SANTOS, NILDA CName:SANTOS, NILDA CAddress:133 NORTH POMPANO BEACH BLVD. #308Address:15280 JOG ROAD

City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: DELRAY BEACH, FL 33484

Title: V () Delete Title: V (X) Change () Addition

 Name:
 PERES, POLA Name:
 PERES, POLA

 Address:
 200 WEST CORAL TRACE CIRCLE
 Address:
 15280 JOG ROAD

City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33484

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: NILDA SANTOS P 11/03/2004