2004 FOR PROFIT CORPORATION

SIGNATURE:

Jun 04, 2004 8:00 am ANNUAL REPORT Secretary of State DOCUMENT # P02000023208 06-04-2004 90268 001 ***300.00 1. Entity Name ALLTRESS BEAUTY SUPPLY, INC. Principal Place of Business Mailing Address 4682 N. POWERLINE RD - 66426659 4682 N. POWERLINE RD DEERFIELD BEACH, FL 33073 DEERFIELD BEACH, FL 33073 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04062004 Chg-P CR2E034 (10/03) City & State City & State 4. FFI Number Applied For 03-0415170 Not Applicable Zip Country Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KLEIN, JEFFREY G 2101 NW CORPORATE BLVD. SUITE 414 Stréet Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33431 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE; Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change Addition TITLE ☐ Delete TITLE NAME RAY, ROBERT F NAME 2830 NE 56 4 Court STREET ADDRESS 7216 SAN SEBASTIN DRIVE STREET ADDRESS BOCA RATON, FL 33432 CITY-ST-ZIP CITY-ST-ZIP Ft. Landerdale, FL Change Addition TITLE ☐ Delete TITI F NAME TROCDA, A. PAUL NAME 2830 NE 564 Court STREET ADDRESS 7216 SAN SEBASTIN DRIVE STREET ADDRESS BOCA RATON, FL 33432 CITY-ST-71P CITY-ST-7IP Ft-Landerdale, FL TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TTUE Detete 7M E ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 empo

66426659 Affachment 5716/04 P98000021015 \$ P02000023208 10 whom It May Concern, Regrestfully of Saul Trowlen of Repurels Ine & action beauty Lupply Suc. had left the necessary info. To the charge I my receptionist to send out the checks x the proper filed popers to sublait to upan but they were not done the ruson ... for the late filing is because an april of I had so fly to U.J. so may father had become critically ell and on His buthay april (1 he passed away. My stay was much longer than I expected and I remained there centil the 5 of may. Unfortunately my attention was shifted doward family mothers and so the fileing was oreerlooked. If the peralty can be removed it would be greatly apprecented. If not I will make the neccessary awangements to take care of the rest. Caul A croal President