

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000026913

FILED
Jun 07, 2004
Secretary of State

Entity Name: FRANCIS JADE SALON, INC.

Current Principal Place of Business:

499 N. SR 434 STE 1029
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

499 N. SR 434 STE 1029
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 02-0568391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, MIRIAM J
650 TRAILWOOD DR
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

KELLY, MIRIAM J
276 N. S.R. 434 #429
ALTAMONTE SPRINGS, FL 32714 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: MIRIAM J. KELLY

06/07/2004

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:

Title: D () Delete
Name: KELLY, MIRIAM J
Address: 499 N. SR 434 STE 1029
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Delete
Name: KELLY, THOMAS
Address: 650 TRAILWOOD FR.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WALIGURSKY, JENNIFER
Address: 276 SPRINGS COLONY CIRCLE # 227
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: JENNIFER WALIGURSKY

VP

06/07/2004

Electronic Signature of Signing Officer or Director

Date