2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032655

FILED Apr 25, 2006 Secretary of State

Entity Name: CREATIVE HAIR DESIGN OF LAKE PLACID, INC.

Current Principal Place of Business:			New Principal Place of Business:	
200N MAII LAKE PLA	NAVE .CID, FL 33852			
Current Mailing Address:			New Mailing Address:	
200 N MAI LAKE PLA	N AVE CID, FL 33852			
FEI Number	: 03-0407889	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	urrent Registered Agent:	Name and Address o	f New Registered Agent:
200 N MAI LAKE PLA The above	CID, FL 33852 named entity s		ourpose of changing its registered	d office or registered agent, or both,
in the State	e of Florida.			
SIGNATUI		ic Signature of Registered Ag	ent	 Date
Election Car		Trust Fund Contribution ().		Suite
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () SCHOENFELD, 200 N MAIN AVE LAKE PLACID, I	Delete BONNIE	Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS: () Change () Addition
Name: Address:	SCHOENFELD, 200 N MAIN AVE LAKE PLACID, I	Delete BONNIE E FL 33852 Delete CHARLES	Title: Name: Address:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BONNIE SCHOENFELD D 04/25/2006