

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000037772

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** BEST BEAUTY SUPPLY & FASHION, INC.

**Current Principal Place of Business:**

1964 W TENNESSE ST.  
#17  
TALLAHASSEE, FL 32304

**New Principal Place of Business:**

**Current Mailing Address:**

1964 W TENNESSE ST.  
#17  
TALLAHASSEE, FL 32304

**New Mailing Address:**

**FEI Number:** 04-3639227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAEK, EUNKI  
1964 W TENNESSEE STREET #17  
TALLAHASSEE, FL 32304 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: BAEK, EUNKI  
Address: 1964 W TENNESSEE STREET #17  
City-St-Zip: TALLAHASSEE, FL 32304

Title: DVS  
Name: BAEK, GIYOUNG  
Address: 1964 W TENNESSEE STREET #17  
City-St-Zip: TALLAHASSEE, FL 32304

I hereby 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 all other like empowered.

SIGNATURE: BAEKEUNKI

DPT

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date