

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041583

Entity Name: LATIN AMERICA HAIR TEAM, INC

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

6568 NW 186TH STREET
MIAMI LAKES, FL 330156004

New Principal Place of Business:

Current Mailing Address:

6568 NW 186TH STREET
MIAMI LAKES, FL 330156004

New Mailing Address:

6881 SW 3 ST
PEMBROKE PINES, FL 33023

FEI Number: 01-0723142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTANA, GINNA A
6881 SW 3 ST
PEMBROKE PINES, FL 33023 US

Name and Address of New Registered Agent:

CARVAJAL, MARITZA A
6881 SW 3 ST
PEMBROKE PINES, FL 33023 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: MARITZA CARVAJAL

04/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARVAJAL, MARITZA A
Address: 6881 SW 3 ST
City-St-Zip: PEMBROKE PINES, FL 33023

Title: VT () Delete
Name: SANTANA, SANTIAGO A
Address: 6881 SW 3 ST
City-St-Zip: PEMBROKE PINE, FL 33023

Title: S () Delete
Name: SANTANA, NORALIS D
Address: 6881 SW 3 ST
City-St-Zip: PEMBROKE PINES, FL 33023

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: NORALIS SANTANA

S

04/18/2005

Electronic Signature of Signing Officer or Director

Date