

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000044117

FILED
Jun 02, 2005
Secretary of State

Entity Name: I.C.E. BEAUTY SCHOOL AND SPA TRAINING CENTER, INC.

Current Principal Place of Business:

280 S STATE RD 434, STE 2045
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

280 S STATE RD 434
SUITE 2045
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

1135 BRANTLEY EST DR
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

1135 BRANTLEY ESTATES DR
ALTAMONTE SPRINGS, FL 32714

FEI Number: 71-0877409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, DAVID S ESQUIRE
5728 MAJOR BLVD, STE 550
ORLANDO, FL 32819 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

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: OSBORNE, DONNA J
Address: 1135 BRANTLEY ESTATES DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: OSBORNE, JAMES S
Address: 19455 HOAG CT
City-St-Zip: MUNDELIN, IL 60060

Title: D () Delete
Name: OSBORNE DECHENE, MICHELLE L
Address: 14230 BLAINE
City-St-Zip: POSEN, IL 60469

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: DONNA J. OSBORNE

PRES

06/02/2005

Electronic Signature of Signing Officer or Director

Date