2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Feb 26, 2008 8:00 am **Secretary of State** DOCUMENT # P02000047014 02-26-2008 90003 017 ***150.00 QUISQUEYA BEAUTY SALON CORP. Principal Place of Business Mailing Address 1717 NW 17 AVE 1717 NW 17 AVE MIAMI, FL 33125 MIAMI, FL 33125 01232008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 37-1455303 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RICOBALDI, IRIS DO NOT WRITE 1653 NW 22 PLACE MIAMI, FL 33125 IN THIS SPACE 8. The above named entity submits the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered a SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE RICOBALDI. IRIS NAME 1653 NW 22 PLACE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33125 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that of signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the eceiver or trustee empowered to except this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other ke empowered.

FILED

Daylime Phone #