

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000061574

FILED
Mar 29, 2007
Secretary of State

Entity Name: BELLISIMA HAIR SALON, INC.

Current Principal Place of Business:

3199 W. VINE STREET
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

3199 W. VINE STREET
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 01-0704962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYES, LISSETTE
5425 DAHLIA RESERVE DRIVE
KISSIMMEE, FL 34758 US

Name and Address of New Registered Agent:

REYES, LISSETTE
4978 TOWN TERRACE N.
KISSIMMEE, FL 34758 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: LISSETTE REYES

03/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REYES, LISSETTE
Address: 5425 DAHLIA RESERVE DRIVE
City-St-Zip: KISSIMMEE, FL 34758

Title: V () Delete
Name: ORTIZ, ANITA
Address: 2006 LILY PAD CT.
City-St-Zip: KISSIMMEE, FL 34743

Title: T () Delete
Name: ESCUDERO, HAROLD
Address: 5425 DAHLIA RESERVE DRIVE
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REYES, LISSETTE
Address: 4978 TOWN TERRACE N.
City-St-Zip: KISSIMMEE, FL 34758

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

Title: T (X) Change () Addition
Name: ESCUDERO, HAROLD
Address: 4978 TOWN TERRACE N.
City-St-Zip: KISSIMMEE, FL 34758

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: LISSETTE REYES

P

03/29/2007

Electronic Signature of Signing Officer or Director

Date