2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003
Secretary of State

DOCUMENT# P02000067748

Entity Name: TRANZITIONS HAIR DESIGN, INC.

Current Principal Place of Business:

8850 NORTH HIMES AVENUE
TAMPA, FL 33614

New Principal Place of Business:

205 ORANGEVIEW AVENUE
CLEARWATER, FL 33755

Current Mailing Address:

8850 NORTH HIMES AVENUE
TAMPA, FL 33614

New Mailing Address:

205 ORANGEVIEW AVENUE
CLEARWATER, FL 33755

FEI Number: 90-0037600 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIARD, SHELLEY D
8850 NORTH HIMES AVENUE
TAMPA, FL 33614

Name and Address of New Registered Agent:

GIARD, SHELLEY D
205 ORANGEVIEW AVENUE
CLEARWATER, FL 33755

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: _____ 05/01/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR ( ) Change (X) Addition
Name: TALBOTT, JOHN H DO
Address: 205 ORANGEVIEW AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: MS ( ) Change (X) Addition
Name: TALBOTT, BALEIGH C SEC
Address: 205 ORANGEVIEW AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: MS. ( ) Change (X) Addition
Name: WILLIAMS, CIERRA D SEC
Address: 205 ORANGEVIEW AVENUE
City-St-Zip: CLEARWATER, FL 33755

Title: MS. ( ) Change (X) Addition
Name: GIARD, SHELLEY D PRES
Address: 205 ORANGEVIEW AVE.
City-St-Zip: CLEARWATER, FL 33755

Title: MRS. ( ) Change (X) Addition
Name: GIARD-POWELL, JUDY A VP
Address: 405 AMBERLEA DR.
City-St-Zip: LYMAN, SC 29365

Title: MR ( ) Change (X) Addition
Name: GIARD, RONALD P TREAS
Address: 180 SIMON DR
City-St-Zip: MOORE, SC 29369

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: JUDY GIARD-POWELL VP 05/01/2003
Electronic Signature of Signing Officer or Director — Date