

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000106926

FILED
Apr 23, 2010
Secretary of State

Entity Name: PROBEAUTY DISTRIBUTORS INC.

Current Principal Place of Business:

3750 NW 114 AVE
DORAL, FL 33178

New Principal Place of Business:

Current Mailing Address:

3750 NW 114 AVE
DORAL, FL 33178

New Mailing Address:

FEI Number: 90-0056011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, ANTHONY G JR
3275 W HILLSBORO BLVD STE 207
DEERFIELD BCH, FL 33442 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES
Name: LOGIN, MORLIN P
Address: 3750 NW 114 AVE
City-St-Zip: DORAL, FL 33178

Title: VP
Name: PARRELLA, NICOLE J
Address: 3275 W. HILLSBORO BLVD 101
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: TRES
Name: ANTHONY G COLEMAN JR PA
Address: 3275 W. HILLSBORO BLVD 101
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: CO
Name: AFFINITY BEAUTY CONCEPTS
Address: 3750 NW 114 AVE
City-St-Zip: DORAL, FL 33178

Title: NEW
Name: PROBEAUTY DISTRIBUTORS INC
Address: 3750 NW 114 AVE
City-St-Zip: DORAL, FL 33178

I hereby 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 all other like empowered.

SIGNATURE: MORLIN P LOGIN

PRES

04/23/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date