

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000125168

1. Entity Name
BEAUTY DREAM, INC.



FILED
Sep 23, 2008 08:00 AM
Secretary of State

Principal Place of Business
**1463 SOUTH CONGRESS AVENUE
DELRAY BEACH, FL 33445**

Mailing Address
**1463 SOUTH CONGRESS AVENUE
DELRAY BEACH, FL 33445**



05152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
32-0043590

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**OSMAN, SALIH M
1463 SOUTH CONGRESS AVENUE
DELRAY BEACH, FL 33445**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE
Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

19-9-08

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D**
NAME **OSMAN, SALIH M**
STREET ADDRESS **1249 NW 31ST AVENUE**
CITY - ST - ZIP **FORT LAUDERDALE, FL 33311**

TITLE **D**
NAME **MUSA, MUTASIM**
STREET ADDRESS **1249 NW 31ST AVENUE**
CITY - ST - ZIP **FORT LAUDERDALE, FL 33311**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000959957
09/23/08-80002-005 550.00

**DO NOT WRITE
IN THIS SPACE**

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 my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.