2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2004 8:00 am Secretary of State 04-30-2004 90231 005 ***150.00

DOCUMENT # P03000049423 1. Entity Name JOANNE'S HAIR FACTORY, INC.					04-30-2004 90231 005 ***150.00			0.00
Principal Place of Business	Mailing Address		<u> </u>			_		
2823 WILLOW AVENUE 2823 WILLOW AVENUE .		Ε.		:	Ç	34074	1546	
APT. B LARGO, FL 33771					•	, , ,		
LANCO, 12 33771	LANGO, TE 33771							
Principal Place of Business Address Address								
Suite, Apt. #, etc.	Suite, Apt. #, etc.			04192004	Chg-P	CR2E0	34 (10/03)	
City & State		City & State		4. FEI Number 55-C	84134	15		plied For t Applicable
Zip Country	Zip	Coun	try		Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Cur	rent Registered Agent		11	7. Name and A	ddress of New R	egistered A	\gent	
VALLEJO, JOANNNE			Name					
2823 WILLOW AVENUE APT. B		ı	Street Address (P.O. Box Number is Not Acceptable)					
LARGO, FL 33771								
			City		•	FL	Zip Cod	e
The above named entity submits this statement the obligations of registered agent.	ent for the purpose of changing it	s register	ed office or regis	tered agent, or both	, in the State of Flo	rida. Iam f	amiliar with,	and accept
SIGNATURE Signature, typed or printed name of registered	agent and title if applicable. (NO	TE: Registere	d Agent signature requ	ared when reinstating)	_ 	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$5	9. Election Camp. Trust Fund Cor			55.00 May Be dded to Fees		-		
10. OFFICERS	···							
	AND DIRECTORS	11.			HANGES TO OFF	ICERS AND		*******
TITLE D	AND DIRECTORS Delete	1011	E P.	ADDITIONS/C PRESIDENT		ICERS AND	DIRECTOR:	S IN 11 Addition
	☐ Delete	111£1 NAM	E P.			ICERS AND		*******
NAME VALLEJO, JOANNE	☐ Delete	NAM STRE	E P			ICERS AND		*******
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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.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR