
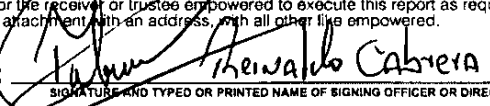


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2006 8:00 am
Secretary of State

03-16-2006 90221 032 ***150.00

DOCUMENT # P03000055253																																																																	
1. Entity Name ODA'REY BEAUTY SALON, INC.																																																																	
Principal Place of Business 4737 WEST FLAGLER STREET MIAMI, FL 33134			Mailing Address 9573 SOUTHWEST 57 STREET MIAMI, FL 33173																																																														
2. Principal Place of Business		3. Mailing Address 4763 NW FLAGLER TERR.																																																															
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																															
City & State		City & State MIAMI, FL		4. FEI Number 54-2362264																																																													
Zip		Zip 33126-5270		Country																																																													
6. Name and Address of Current Registered Agent CABRERA, REINALDO 9573 SOUTHWEST 57 STREET MIAMI, FL 33173				7. Name and Address of New Registered Agent Name: Cabrera, Reinaldo Street Address (P.O. Box Number is Not Acceptable): 4763 NW Flagler Terrace City: Miami, FL Zip Code: 33126-5270																																																													
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;">PTD CABRERA, REINALDO</td> <td style="width: 30%; padding: 2px;"><input type="checkbox"/> Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;">PTD Cabrera, Reinaldo</td> <td style="width: 30%; padding: 2px;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">9573 SOUTHWEST 57 STREET</td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">4763 NW Flagler Terrace</td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">MIAMI, FL 33173</td> <td></td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">Miami, FL 33126-5270</td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;"></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	PTD CABRERA, REINALDO	<input type="checkbox"/> Delete	TITLE	PTD Cabrera, Reinaldo	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	9573 SOUTHWEST 57 STREET		NAME	4763 NW Flagler Terrace		STREET ADDRESS	MIAMI, FL 33173		STREET ADDRESS	Miami, FL 33126-5270		CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP			CITY-ST-ZIP		
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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.																																																																	
SIGNATURE  03/10/06 (305) 506-7741 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																	

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\$8.75 Additional Fee Required