2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# P03000074433

Entity Name: TRU COLOURZ UNISEX SALON INC

Current Principal Place of Business:

10004 S US HIGHWAY 1
PORT ST LUCIE, FL 34952

New Principal Place of Business:

Current Mailing Address:

10004 S US HIGHWAY 1
PORT ST LUCIE, FL 34952

New Mailing Address:

FEI Number: 32-0082266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, ELITTA
768 SW MONSOON RD
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

THOMAS, ELITTA
5952 NW CULEBRA AVE
PORT ST LUCIE, FL 34986 US

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: 04/27/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: THOMAS, ELITTA
Address: 768 SW MONSOON RD
City-St-Zip: PORT ST LUCIE, FL 34953

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: RICHARDS, ROMIE
Address: 5952 NW CULEBRA AVE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: O ( ) Change (X) Addition
Name: GRAHAM, SANDRA
Address: 5952 NW CULEBRA AVE
City-St-Zip: PORT ST LUCIE, FL 34986

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: S GRAHAM O 04/27/2004
Electronic Signature of Signing Officer or Director — Date