

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086217

FILED  
May 28, 2008  
Secretary of State

Entity Name: JONA FASHION BEAUTY CENTER, INC.

**Current Principal Place of Business:**

2420 N.W. 27TH AVE  
MIAMI, FL 331427234

**New Principal Place of Business:**

**Current Mailing Address:**

2420 N.W. 27TH AVE  
MIAMI, FL 331427234

**New Mailing Address:**

FEI Number: 54-2124853

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SANTOS, JOSE M  
6640 WEST 24TH CT  
APT 101  
HIALEAH, FL 33016 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: NUNEZ, SIMONA  
Address: 6640 WEST 24TH CT., APT. 101  
City-St-Zip: HIALEAH, FL 33016

Title: DST ( ) Delete  
Name: SANTOS, JOSE M  
Address: 6640 WEST 24TH CT., APT. 101  
City-St-Zip: HIALEAH, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SIMONA NUNEZ

DP

05/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date