

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000102646

FILED
Sep 25, 2006
Secretary of State

Entity Name: A & A WIG & HAIRPIECE SUPPLIES, CORP.

Current Principal Place of Business:

3167 ST JOHN'S BLUFF RD SOUTH
JACKSONVILLE, FL 32246

New Principal Place of Business:

3167 ST JOHN'S BLUFF RD SOUTH
JACKSONVILLE, FL 32246 US

Current Mailing Address:

3167 ST JOHN'S BLUFF RD SOUTH
JACKSONVILLE, FL 32246

New Mailing Address:

3167 ST JOHN'S BLUFF RD SOUTH
JACKSONVILLE, FL 32246 US

FEI Number: 11-3186922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIMBEL PRICE, ARLENE
3167 ST JOHN'S BLUFF RD SOUTH
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

PRICE, ARLENE
3167 ST JOHN'S BLUFF RD SOUTH
JACKSONVILLE, FL 32246 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: ARLENE PRICE

09/25/2006

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: P () Delete
Name: GIMBEL PRICE, ARLENE
Address: 3167 ST JOHN'S BLUFF RD SOUTH
City-St-Zip: JACKSONVILLE, FL 32246

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PRICE, ARLENE
Address: 3167 ST JOHN'S BLUFF RD SOUTH
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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: ARLENE PRICE

P

09/25/2006

Electronic Signature of Signing Officer or Director

Date