

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103760

Entity Name: THE BODY BARBER INC

FILED
May 06, 2005
Secretary of State

Current Principal Place of Business:

27 OLD ENGLISH DR
CHARLESTON, SC 29407

New Principal Place of Business:

Current Mailing Address:

27 OLD ENGLISH DR
CHARLESTON, SC 29407

New Mailing Address:

FEI Number: 02-0723216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAIZEL, ROBERT
9360 SUNSET DR
SUITE 200
MIAMI, FL 33173 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: P () Delete
Name: QUEVEDO, ALFONSO
Address: 27 OLD ENGLISH DR
City-St-Zip: CHARLESTON, SC 29407

Title: V () Delete
Name: QUEVEDO, COULTON
Address: 27 OLD ENGLISH DR
City-St-Zip: CHARLESTON, SC 29407

Title: S () Delete
Name: HOLLER, BARBARA
Address: 27 OLD ENGLISH DR
City-St-Zip: CHARLESTON, SC 29407

Title: T () Delete
Name: RUTHERFORD, AUSTIN
Address: 27 OLD ENGLISH DR
City-St-Zip: CHARLESTON, SC 29407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: ALFONSO QUEVEDO

P

05/06/2005

Electronic Signature of Signing Officer or Director

Date