2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P04000013785 HAIR DIRECTORS OF WEST PALM BEACH, INC. Principal Place of Business Mailing Address 2480 SO. CONGRESS AVENUE 2480 SO. CONGRESS AVENUE

6. Name and Address of Current Registered Agent

WEST PALM BEACH, FL 33406

FILED Jan 10, 2007 08:00 AM Secretary of State



01062007

| DO | NOT | WRITE | IN | THIS | SPACE |
|----|-----|-------|----|------|-------|

WEST PALM BEACH, FL 33406

CR2E034 (11/05)

| | | |
|----------------------------------|------|-------------------------|
| 4. FEI Number | | Applied For |
| 20-0645962 | | Not Applicabl |
| 5. Certificate of Status Desired | | 5 Additional equired |

No Chg-P

MCCAULEY, DIANA J DO NOT WRITE 2480 SO. CONGRESS AVENUE WEST PALM BEACH, FL 33406 IN THIS SPACE

| | | | | | · , | |
|---|---|--|--------|--------------------------------|---|--|
| 6. 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 | | | | | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Finance Trust Fund Contribution. | cing 🗆 | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIREC | TORS | | , | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MCCAULEY, DIANA J 2480 SO. CONGRESS AVENUE WEST PALM BEACH, FL 33406 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | , | U00000580490 01/10/07-80051-002 150.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO | NOT WRITE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | IN ' | THIS SPACE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |

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 AND TYPED OR PRINTED HAVE IT SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone ● |
|--|----------|-----------------|
| SIGNATURE: DIANA M'CAU) | ey 1-807 | (561) 965 5306 |