

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015852

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: GASTON AND POWELL HEALTH & BEAUTY COMPANY

**Current Principal Place of Business:**

2619 MAYO STREET  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

2256 SIMMS STREET  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 81-0644264      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GASTON, REBECCA T  
2256 SIMMS STREET  
HOLLYWOOD, FL 33020      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DIRE ( ) Delete  
Name: GASTON, REBECCA T A. A.  
Address: 2256 SIMMS STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: DIRE ( ) Delete  
Name: POWELL, IDA M LPN  
Address: 2619 MAYO STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: SEC ( ) Delete  
Name: RAGOONANAN, ANDOLIN C  
Address: 2731 TAFT STREET APT #111  
City-St-Zip: HOLLYWOOD, FL 33020 29

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

Title: DIRE (X) Change ( ) Addition  
Name: GASTON, REBECCA T  
Address: 2256 SIMMS STREET  
City-St-Zip: HOLLYWOOD, FL 33020

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 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: REBECCA GASTON

DIRE

04/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date