2008 FOR PROFIT CORPORATION

Jan 24, 2008 08:00 A **ANNUAL REPORT Secretary of State** DOCUMENT # P04000073199 D & D BEAUTY EXPRESS, INC. Principal Place of Business Mailing Address 1424 FIRST STREET 1424 FIRST STREET WINTER HAVEN, FL 33881 WINTER HAVEN, FL 33881 01052008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1061460 Not Applicable \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ELORISH, ALI 1424 FIRST STREET WINTER HAVEN, FL 33881 8. 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 01/25/08-80025-008 ISO.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITI F ELQRISH, ALI NAME STREET ADDRESS 1424 FIRST STREET CITY-ST-7IP WINTER HAVEN, FL 33881 TITLE Application of the property of NAME STREET ADDRESS CITY-ST-7IP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE ada da karanga kalika da manda da karanga da karanga da karanga karanga karanga karanga karanga karanga karang NAME Talahan kalaman kalama and the same of the contract o STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this fiting 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:

TITLE NAME

STREET ADDRESS CITY-ST-ZIP

PURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

apolitika alajakan kila kilokan kanada diseberan kalabaran da bibi sa bibi

FILED