2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2005
Secretary of State

DOCUMENT# P04000107042

Entity Name: BELLEZZA MEDSPA, INC.

Current Principal Place of Business:

125 NE FIRST AVE STE 1
OCALA, FL 34470

New Principal Place of Business:

1503 NE 10TH STREET
OCALA, FL 34470

Current Mailing Address:

125 NE FIRST AVE STE 1
OCALA, FL 34470

New Mailing Address:

1503 NE 10TH STREET
OCALA, FL 34470

FEI Number: 20-1453853 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HAINES, TIM D
125 NE FIRST AVE STE 1
OCALA, FL 34470 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: D ( ) Delete
Name: HAINES, TIM D
Address: 125 NE FIRST AVE STE 1
City-St-Zip: OCALA, FL 34470

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MORRIS, MERRISSA D
Address: 1503 NE 10TH STREET
City-St-Zip: OCALA, FL 34470

Title: V ( ) Change (X) Addition
Name: KINGSLEY, AMY S
Address: 1503 NE 10TH STREET
City-St-Zip: OCALA, FL 34470

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: AMY S. KINGSLEY V 07/15/2005

Electronic Signature of Signing Officer or Director — Date