

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155416

FILED
Apr 26, 2008
Secretary of State

Entity Name: BEAUTY XPRESSIONS INCORPORATED

Current Principal Place of Business:

GULVIEW SQUARE MALL
9409 US 19 N STE 277
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

GULFVIEW SQUARE MALL
9409 US 19N STE 277
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 20-1886112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADONIZ, JILL
1530 VILLA CAPRI CIRCLE
APT. #309
ODESSA, FL 33556 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: D () Delete
Name: ADONIZ, JILL
Address: 1530 VILLA CAPRI CIRCLE, APT #309
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: JILL ADONIZ

D

04/26/2008

Electronic Signature of Signing Officer or Director

Date