2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 22, 2006
Secretary of State

DOCUMENT# P05000003221

Entity Name: SOFT TOUCH FAMILY HAIR STYLING, INC.

Current Principal Place of Business:

7166 SW 117TH AVENUE
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

7166 SW 117TH AVENUE
MIAMI, FL 33183

New Mailing Address:

FEI Number: 56-2495144 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANCHEZ, RAUL
7166 SW 117TH AVENUE
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

MARTINEZ, TAMMY
7166 SW 117TH AVENUE
MIAMI, FL 33183 US

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: TAMMY MARTINEZ 08/22/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: SANCHEZ, RAUL
Address: 7166 SW 117TH AVENUE
City-St-Zip: MIAMI, FL 33183

Title: D ( ) Delete
Name: MARTINEZ, TAMMY
Address: 7166 SW 117TH AVENUE
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D/P (X) Change ( ) Addition
Name: MARTINEZ, TAMMY
Address: 7166 SW 117TH AVENUE
City-St-Zip: MIAMI, FL 33183

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: TAMMY MARTINEZ P 08/22/2006
Electronic Signature of Signing Officer or Director Date