2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000016529

Entity Name: FRANCHESKA HEALTH AND BEAUTY INC

FILED Sep 06, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Current Principal Place of Business: New Principal Place of Business:

8908 N 56TH ST 6610 COLLINS AVE TEMPLE TERRACE, FL 33617 MIAMI BCH, FL 33141

Current Mailing Address: New Mailing Address:

8908 N 56TH ST 6610 COLLINS AVE TEMPLE TERRACE, FL 33617 MIAMI BCH, FL 33141

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

ANGEL M, VEGA YO, SIN 8894 N 56TH ST 505 N.E. 82ND. STREET TEMPLE TERRACE, FL 33617 US MIAMI, FL 33138 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: ANGEL M VEGA 09/06/2006

> Electronic Signature of Registered Agent Date

> > Title:

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: () Delete MEDINA, MARGARITA Name:

Name: VEGA, ANGEL M 8606 N 20TH ST 7545 E TREASURE DR. UNIT 7 K Address: Address: City-St-Zip: TAMPA, FL 33604 City-St-Zip: NO. BAY VILLAGE, FL 33141

Title: Title: (X) Change () Addition () Delete FRANCHESKA, RIVERA FRANCHESKA, RIVERA Name: Name: Address: Address:

9610 SHALIMAR CT. 7545 E TREASURE DR. UNIT 7 K N. BAY VILLAGE, FL 33141 TAMPA, FL 33615 City-St-Zip: 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.

Ρ SIGNATURE: ANGEL M VEGA 09/06/2006