


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90200 014 ***150.00

DOCUMENT # P05000032185			
1. Entity Name CLASSIC CURLS, INC.			
Principal Place of Business 1247 DEERBOURNE DRIVE WESLEY CHAPEL, FL 33617 US		Mailing Address 1247 DEERBOURNE DRIVE WESLEY CHAPEL, FL 33617 US	
2. Principal Place of Business - No P.O. Box # 31105 SATINLEAF LN.		3. Mailing Address 31105 SATINLEAF LN.	
Suite, Apt. #, etc. WESLEY CHAPEL		Suite, Apt. #, etc. WESLEY CHAPEL	
City & State FLORIDA		City & State FLORIDA	
Zip 33543	Country PASCO	Zip 33543	Country PASCO
6. Name and Address of Current Registered Agent BYRNE, DANIEL E 31105 SATINBAK LANE ← 31105 SATINLEAF LANE WESLEY CHAPEL, FL 33543		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BYRNE, DANIEL E 1247 DEERBOURNE DRIVE WESLEY CHAPEL, FL 33543 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BYRNE DANIEL E. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 31105 SATINLEAF LANE WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BROWN, BRUCE G 6205 FARTHING STREET TAMPA, FL 33647 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	NO LONGER WITH CORPORATION <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T PERNA III, RICHARD J 29635 BIRDS EYE DRIVE WESLEY CHAPEL, FL 33543 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-20-07 813-385-4319