2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000053312

Entity Name: HAIR JAMAICA BEAUTY, INC.

FILED May 01, 2006 Secretary of State

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

3091 NW 64TH AVE 3226 NW 88TH AVE SUNRISE, FL 33313 SUNRISE, FL 33351

Current Mailing Address: New Mailing Address:

3091 NW 64TH AVE 3226 NW 88TH AVE SUNRISE, FL 33313 SUNRISE, FL 33351

FEI Number: 27-0121405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 LOWE, AVRIL
 3091 NW 64TH AVE
 3226 NW 88TH AVE

 SUNRISE, FL 33313
 US
 SUNRISE, FL 33351
 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: 05/01/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 LOWE, AVRIL
 Name:
 LOWE, AVRIL

 Address:
 3091 NW 64TH AVE
 Address:
 3226 NW 88TH AVE

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:
 SUNRISE, FL 33351

Title: D () Delete Title: D (X) Change () Addition

 Name:
 NORRIS, DAVID
 Name:
 NORRIS, DAVID

 Address:
 3091 NW 64TH AVE
 Address:
 3226 NW 88TH AVE

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:
 SUNRISE, FL 33351

Title: D () Delete Title: D (X) Change () Addition

 Name:
 BECKFORD, DONALD
 Name:
 BECKFORD, DONALD

 Address:
 3091 NW 64TH AVE
 Address:
 3226 NW 88TH AVE

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:
 SUNRISE, FL 33351

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: AVRIL LOWE P 05/01/2006