

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000067131

Entity Name: BEAUTYTARGET, INC

FILED
May 12, 2006
Secretary of State**Current Principal Place of Business:**10045 CANOPY TREE CT
ORLANDO, FL 32836**New Principal Place of Business:**5401 S. KIRKMAN ROAD
SUITE # 310
ORLANDO, FL 32819**Current Mailing Address:**10045 CANOPY TREE CT
ORLANDO, FL 32836**New Mailing Address:**5401 S. KIRKMAN ROAD
SUITE # 310
ORLANDO, FL 32819

FEI Number: 20-2807629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:MOYAL, PATRICK
208 N UNIVERSITY DRIVE
PEMBROKE PINES, FL 33024 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**OFFICERS AND DIRECTORS:**Title: P,D () Delete
Name: DELCOURT, DOMINIQUE
Address: 10045 CANOPY TREE CT
City-St-Zip: ORLANDO, FL 32836**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 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: DOMINIQUE DELCOURT

PD

05/12/2006

Electronic Signature of Signing Officer or Director_____
Date