2008 FOR PROFIT CORPORATION

FILED ANNUAL REPORT May 22, 2008 08:00 AN Secretary of State **DOCUMENT # P05000075094** PREMIER IMAGE STYLING STUDIO INC Principal Place of Business Mailing Address 2205G GRANT AVE 2205G GRANT AVE PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 05202008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2878707 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent **HUTCHINSON, CINDY L** DO NOT WRITE 2205G GRANT AVE PANAMA CITY, FL 32405 IN THIS SPACE 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, typed or printed name of registered agent and title if explicable (NOTE: Registered Agent eigneture required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWILL FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 12, 2008 10. OFFICERS AND DIRECTORS TITLE HUTCHIINSON, CINDY L NAME STREET ADDRESS 2205G GRANT AVE U00000951982 06/04/08-80056-010 150.00 CITY-ST-ZIP PANAMA CITY, FL 32405 TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if

SIGNATURE:

NAME STREET ADDRESS CITY-ST-7IP