2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000081286

FILED Apr 10, 2006 Secretary of State

Entity Name:	CAPRICHOS BEAUTY SALON, II	IC.
Current Princi	pal Place of Business:	New Principal Place of Business:
20 NW 56TH C FT LAUDERDA		1306 N UNIVERSITY DRIVE CORAL SPRINGS, FL 33071
Current Mailin	g Address:	New Mailing Address:
100 E PALM DF MARGATE, FL		
FEI Number: 14-19	933233 FEI Number Applied For) FEI Number Not Applicable () Certificate of Status Desired ()
Name and Add	ress of Current Registered Age	nt: Name and Address of New Registered Agent:
RIBIO, MARTHA Y		RUBIO, MARTHA Y PRESIDE
20 NW 56TH C FT LAUDERDA		100 E PALM DRIVE MARGATE, FL 33063 US
The above nam in the State of F		r the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	MARTHA Y RUBIO	04/10/2006
_	Electronic Signature of Register	ed Agent Date
Election Campaign	n Financing Trust Fund Contribution ().
OFFICERS AN	D DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	() Delete	Title: P () Change (X) Addition Name: RUBIO, MARTHA Y P Address: 100 E PALM DRIVE City-St-Zip: MARGATE, FL 33063
Title: Name: Address: City-St-Zip:	() Delete	Title: V () Change (X) Addition Name: RUBIO, ADRIAN F V Address: 100 E PALM DRIVE City-St-Zip: MARGATE, FL 33063
Title: Name: Address: City-St-Zip:	() Delete	Title: TREA () Change (X) Addition Name: RUBIO, MARTHA Y TREA Address: 100 E PALM DRIVE City-St-Zip: MARGATE, FL 33063
Title: Name: Address: City-St-Zip:	() Delete	Title: SEC () Change (X) Addition Name: RUBIO, ADRIAN F SEC Address: 100 E PALM DRIVE City-St-Zip: MARGATE, FL 33063

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: MARTHA Y RUBIO **PRES** 04/10/2006