

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092725

FILED
May 02, 2006
Secretary of State

Entity Name: EYE CANDY-THE BEAUTY BAR, INC

Current Principal Place of Business:

1830 DEL PRADO BLVD., UNIT 9
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

1830 DEL PRADO BLVD., UNIT 9
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 02-0747972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLSON, ERIKA
3319 PELICAN BLVD.
CAPE CORAL, FL 339147811 US

Name and Address of New Registered Agent:

OLSON, ERIKA
1727 SE 8TH PL
CAPE CORAL, FL 33990 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: ERIKA OLSON

05/02/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OLSON, ERIKA
Address: 1830 DEL PRADO BLVD., UNIT 9
City-St-Zip: CAPE CORAL, FL 33990

Title: V () Delete
Name: FESTA, MELISSA
Address: 1830 DEL PRADO BLVD., UNIT 9
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ERIKA OLSON

P

05/02/2006

Electronic Signature of Signing Officer or Director

Date