

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000124191

Entity Name: BEAUTY INC OF SOUTH FLORIDA

FILED
Dec 05, 2006
Secretary of State

Current Principal Place of Business:

P.O.BOX 551833
OPA LOCKA, FL 33055

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 551833
OPA LOCKA, FL 33055

New Mailing Address:

FEI Number: 01-0843444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLLS, DEBORAH
4313 W WHITEWATER AVE
WESTON, FL 33332 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: DEBORAH NICHOLLS

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:

Title: P () Delete
Name: NICHOLLS, DEBORAH
Address: 4313 W WHITEWATER AVE
City-St-Zip: WESTON, FL 33332

Title: V () Delete
Name: MAYCOCK, PATRICE
Address: 1850 NW 172ND TERR
City-St-Zip: OPA LOCKA, FL 33056

Title: T () Delete
Name: PETTINGILL, STACY
Address: 20815 NW 15TH ST
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DEBORAH NICHOLLS

P

12/05/2006

Electronic Signature of Signing Officer or Director

Date