2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P05000126440

Entity Name: FREDRICKA BEAUTY SALON INC

Current Principal Place of Business:

218 MIKE ST
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

218 MIKE ST
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 20-3473129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, ROBIN F
36435 VIA MARCIA
FRUITLAND PARK, FL 34731 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

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: BROWN, ROBIN F MRS
Address: 36435 VIA MARCIA
City-St-Zip: FRUITLAND PARK, FL 34731

Title: MANG ( ) Delete
Name: CANADY, CORESTA R
Address: 2512 SPRING HARBOR CIR APT 3
City-St-Zip: MOUNT DORA, FL 32757

Title: VP ( ) Delete
Name: JARRETT, DAMARA D
Address: 36435 VIA MARICA
City-St-Zip: FRUITLAND PARK, FL 34731

Title: VP ( ) Delete
Name: SPEIGHT, JAMMIE T
Address: 2311 W GRIFFIN RD APT K8
City-St-Zip: LEESBURG, FL 34748

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:

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: ROBIN BROWN P 05/01/2006

Electronic Signature of Signing Officer or Director Date