## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000148362

Title:

Name:

Address:

City-St-Zip:

() Delete

DA COSTA, CLEUSANITA G

1325 SE 8TH AVE., #207-A

DEERFIELD BCH, FL 33441

FILED Aug 31, 2006 Secretary of State

Entity Nar	me: BELLA F	FIORE SALON & SPA, CORP.			
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
336 SE 15TH AVE. DEERFIELD BCH, FL 33441				1602 SE 3RD COURT DEERFIELD BCH, FL 33441	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
336 SE 15TH AVE. DEERFIELD BCH, FL 33441				1602 SE 3RD COURT DEERFIELD BCH, FL 33441	
FEI Number:	: 20-3750627	FEI Number Applied For ( )	FEI Number Not Applicable (	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
OLIVEIRA, LEDIMAR S 336 SE 15TH AVE. DEERFIELD BCH, FL 33441 US			1602 SE 3RD COL	OLIVEIRA, LEDIMAR S 1602 SE 3RD COURT DEERFIELD BCH, FL 33441 US	
	named entity e of Florida.	submits this statement for the p	urpose of changing its regist	tered office or registered agent, or both,	
SIGNATURE: LEDIMAR S. OLIVEIRA				08/31/2006	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no ng Trust Fund Contribution (  ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD ( SALES, ANGE 241 NW 43RE POMPANO BO	ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	TD ( OLIVEIRA, LE 925 NW 45TH POMPANO BO	ST.	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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.

Title:

Name:

Address:

City-St-Zip:

SD

(X) Change ( ) Addition

DA COSTA, CLEUSANITA G

DEERFIELD BCH, FL 33441

1650 SE 3RD COURT

SIGNATURE: YONNE DEBARROS ESTEVES PD 08/31/2006