## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000151447

FILED Apr 29, 2006 Secretary of State

Entity Name: GENESIS BEAUTY STORE AND GIFT SHOP CORPORATION

Current Principal Place of Business: 132 W. FLAGLER ST. MAMI, FL 33130		New Principal Place of Business:		
Current Mailing Address:		New Mailing Address:		
132 W. F IIAMI, FL	LAGLER ST. 33130			
El Number:	: 20-3795562	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	ANOS, CHRIS AVE., APT. 1 33130 US	ΓΙΑΝ		
	named entity s of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the State	e of Florida. RE: Electron	ic Signature of Registered Ag		ed office or registered agent, or both,  Date
n the State	e of Florida. RE: Electron			
n the State	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
n the State	e of Florida.  RE: Electron  mpaign Financing  S AND DIREC	ic Signature of Registered Agg Trust Fund Contribution (). TORS: Delete ORINDA E., APT. 1	ent	Date
n the State IGNATUR  Ilection Car  DFFICERS  ittle: ame: ddress:	e of Florida.  RE: Electron mpaign Financing S AND DIREC  PD () ORELLANA, FL 340 SW 10 AVE MIAMI, FL 331: V ()	ic Signature of Registered Agg Trust Fund Contribution ().  TORS:  Delete ORINDA E., APT. 1 30  Delete LLANA, ELENA PATRICIA E., APT. 1	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: ELENA RADILLO V 04/29/2006