

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000006789

FILED
Mar 30, 2011
Secretary of State

Entity Name: FABULOUS HAIR FOR DESPERATE HOUSEWIVES INC

Current Principal Place of Business:

5380 NORTH OCEAN DRIVE #5B
SINGER ISLAND, FL 33404

New Principal Place of Business:

4394 NORTHLAKE BLVD
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

5380 NORTH OCEAN DRIVE #5B
SINGER ISLAND, FL 33404

New Mailing Address:

FEI Number: 20-4142993 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SHERMAN, LAURETTA
5380 NORTH OCEAN DRIVE #5B
SINGER ISLAND, FL 33404 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: SHERMAN, IVAN
Address: 5380 NORTH OCEAN DRIVE #5B
City-St-Zip: SINGER ISLAND, FL 33404

Title: D
Name: SHERMAN, LAURETTA
Address: 5380 NORTH OCEAN DRIVE #5B
City-St-Zip: SINGER ISLAND, FL 33404

Title: D
Name: SHERMAN, PARIS
Address: 5380 NORTH OCEAN DRIVE #5B
City-St-Zip: SINGER ISLAND, FL 33404

I hereby 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 all other like empowered.

SIGNATURE: LAURETTA SHERMAN

D

03/30/2011

Electronic Signature of Signing Officer or Director

Date