2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2008
Secretary of State

DOCUMENT# P06000007205

Entity Name: HAIR X-PECTATIONS, INC.

Current Principal Place of Business:

4649 CLYDE MORRIS BLVD., #604
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

4649 CLYDE MORRIS BLVD., #604
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 33-1140904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DO, THIEN V OWNER
4649 CLYDE MORRIS BLVD., #604
PORT ORANGE, FL 32129 US

Name and Address of New Registered Agent:

DO, THIEN V OWNER
1611 TOWN PARK DR.
PORT ORANGE, FL 32129 US

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: THIENVANDO 02/20/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: OWN ( ) Delete
Name: LE, THUAN D
Address: 4649 CLYDE MORRIS BLVD., #604
City-St-Zip: PORT ORANGE, FL 32129

Title: OWN ( ) Delete
Name: DO, THIEN V OWNER
Address: 4649 CLYDE MORRIS BLVD., #604
City-St-Zip: PORT ORANGE, FL 32129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OWN (X) Change ( ) Addition
Name: LE, THUAN D
Address: 1611 TOWN PARK DR
City-St-Zip: PORT ORANGE, FL 32129

Title: OWN (X) Change ( ) Addition
Name: DO, THIEN V OWNER
Address: 1611 TOWN PARK DR.
City-St-Zip: PORT ORANGE, FL 32129

I hereby certify that the information supplied with this filing does not qualify 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: THIENVANDO OWN 02/20/2008
Electronic Signature of Signing Officer or Director Date