2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000031154

FILED May 20, 2009 Secretary of State

Entity Name: A BEAUTIFUL BEGINNING, INC.							
Current Principal Place of Business:				New Principal Place of Business:			
633 SW AVE B BELLE GLADE, FL 33430				753 CAMELLIA DRIVE ROYAL PALM BEACH, FL 33411			
Current Mailing Address:				New Mailing Address:			
633 SW AVE B BELLE GLADE, FL 33430				753 CAMELLIA DRIVE ROYAL PALM BEACH, FL 33411			
FEI Number:	01-0860238	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate	of Status Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Regis	tered Agent:
HODGES, VONTRECA 12399 WESTHAMPTON CIRCLE WELLINGTON, FL 33414 US				HODGES, VONTRECA 1753 CAMELLIA DRIVE ROYAL PALM BEACH, FL 33411 US			
The above in the State		submits this statement for the p	urpose of	f changing it	s registered	office or reg	istered agent, or both,
SIGNATURE:				05/20/2009			
	Electron	ic Signature of Registered Age	nt			Da	ate
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive tl	he prior notice) .		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	AYERS, AL	Delete AMPTON CIRCLE FL 33414		Title: Name: Address: City-St-Zip:	() Change ()	Addition
Title: Name: Address: City-St-Zip:	HODGES, VON	AMPTON CIRCLE		Title: Name: Address: City-St-Zip:	P (X HODGES, VO 753 CAMELLI ROYAL PALM	A DRIVE	
Title: Name: Address: City-St-Zip:	HODGES, WILL	AMPTON CIRCLE		Title: Name: Address: City-St-Zip:	V (X HODGES, WII 753 CAMELLI ROYAL PALM	A DRIVE	
Title: Name: Address: City-St-Zip:	AYERS, VERNI	AMPTON CIRCLE		Title: Name: Address: City-St-Zip:	AYERS, VERN 753 CAMELLI		

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: VONTRECA HODGES Ρ 05/20/2009