2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000059046

Entity Name: JOHANNY'S BEAUTY SALON AND BARBER SHOP, INC

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	LYWOOD BLV OOD, FL 3302						
Current Mailing Address:			New Mailing Address:				
	LYWOOD BLV OOD, FL 3302						
FEI Number	: 72-1616061	FEI Number Applied For()	FEI Number Not Appl	licable ()	Certificate of Status Desired ()		
Name and	d Address of C	Current Registered Agent:	Name and Address of New Registered Agent:				
HOLLYW(The above	LYWOOD BLV DOD, FL 3302 e named entity:	1 US	ourpose of changing i	ts registered	office or registered agent, or bot	h,	
in the State	e of Florida.						
SIGNATU						_	
	Electror	ic Signature of Registered Age	ent	Date			
Election Ca	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PD () FRANCO, LUIS 5925 HOLLYW HOLLYWOOD,	OOD BLVD	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	VD () FRANCO, MILA 5925 HOLLYW HOLLYWOOD,	OOD BLVD	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	PD (FRANCO, LUI 5925 HOLLY\ HOLLYWOOI	WOOD BLVD		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	VD (FRANCO, MIL 5925 HOLLY\ HOLLYWOOI	WOOD BLVD		

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: LUIS M. FRANCO PD 04/24/2007