

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000068617

Entity Name: PASSION FOR HAIR INC.

FILED
Feb 12, 2007
Secretary of State

Current Principal Place of Business:

1230 SW 4TH AVE
POMPANO BEACH, FL 33060

New Principal Place of Business:

602 NE 27TH STREET
UNIT F
WILTON MANORS, FL 33334

Current Mailing Address:

1230 SW 4TH AVE
POMPANO BEACH, FL 33060

New Mailing Address:

602 NE 27TH STREET
UNIT F
WILTON MANORS, FL 33334

FEI Number: 71-1004709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TINOCO, FERNANDO D
1230 SW 4TH AVE
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

TINOCO, FERNANDO D
602 NE 27TH STREET
UNIT F
WILTON MANORS, FL 33334 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: FERNANDO TINOCO

02/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TINOCO, FERNANDO D
Address: 1230 SW 4 AVE
City-St-Zip: POMPAN0 BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TINOCO, FERNANDO D
Address: 602 NE 27TH STREET
City-St-Zip: WILTON MANORS, FL 33334

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: FERNANDON TINOCO

P

02/12/2007

Electronic Signature of Signing Officer or Director

Date