## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000090795

FILED Aug 30, 2007 Secretary of State

Entity Name: TINA'S 3RD STREET HAIR SALON, SPA & BOUTIQUE INC.,

| Current Principal Place of Business:  |  |  | New Principal Place                         | New Principal Place of Business:       |  |
|---|--|--|---|--|--|
| 255 13TH <i>A</i><br>201 & 201A   | AVENUE SOUT  | ·н   |   |  |  |
| NAPLES, FL 34102  |  |  |   |  |  |
| Current Mailing Address:  |  |  | New Mailing Address                         | New Mailing Address:                   |  |
| 255 13TH <i>A</i><br>201 & 201 <i>A</i><br>NAPLES, F                                    |  | TH .   |   |  |  |
| FEI Number:   | 20-5203408   | FEI Number Applied For ( )   | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )      |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |  |  |   |  |  |
| NAPLES, F<br>The above<br>in the State  | AVENUE NE<br>L 34120 US<br>named entity si<br>of Florida.      |  | urpose of changing its registered           | d office or registered agent, or both, |  |
| SIGNATUR  |  | c Signature of Registered Age  | ent   | <br>Date                               |  |
| Election Carr   | e with s. 607.193  | (2)(b), F.S., the corporation did no<br>Trust Fund Contribution ( ). | t receive the prior notice.                 | ES TO OFFICERS AND DIRECTORS:          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PRES () I<br>ALEXANDRA, TII<br>2030 22ND AVEI<br>NAPLES, FL 34 | NUE NE   | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                |  |

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: TINA ALEXANDRA PRES 08/30/2007