

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000092584

FILED
Jan 22, 2008
Secretary of State

Entity Name: BEAUTY MAX INTERNATIONAL SUPPLY, INC.

Current Principal Place of Business:

2211 WILSON BLVD NORTH
NAPLES, FL 34120

New Principal Place of Business:

5107 2ND ST. W
LEHIGH ACRES, FL 33971

Current Mailing Address:

2211 WILSON BLVD NORTH
NAPLES, FL 34120

New Mailing Address:

5107 2ND ST.W
LEHIGH ACRES, FL 33971

FEI Number: 20-5247870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALSINA, CESAR
8951 BONITA BEACH ROAD
401
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

ALSINA, CESAR
11308 BONITA BEACH ROAD
101
BONITA SPRINGS, FL 34135 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: CESAR ALSINA

01/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RAMIREZ, VERONICA
Address: 2211 WILSON BLVD NORTH
City-St-Zip: NAPLES, FL 34120

Title: V () Delete
Name: RAMIREZ, GUILLERMO
Address: 2211 WILSON BLVD NORTH
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RAMIREZ, VERONICA
Address: 5107 2ND ST. W
City-St-Zip: LEHIGH ACRES, FL 33971

Title: V (X) Change () Addition
Name: RAMIREZ, GUILLERMO
Address: 5107 2ND ST. W
City-St-Zip: LEHIGH ACRES, FL 33971

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: VERONICA RAMIREZ

P

01/22/2008

Electronic Signature of Signing Officer or Director

Date