

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107487

FILED
May 02, 2007
Secretary of State

Entity Name: EXQUISITE BEAUTY SUPPLIES, INC

Current Principal Place of Business:

1544 SOUTH EAST FACULTY COURT
PORT ST LUCIE, FL 34952 US

New Principal Place of Business:

10542 S FEDERAL HWY
PORT ST LUCIE, FL 34952 US

Current Mailing Address:

1544 SOUTH EAST FACULTY COURT
PORT ST LUCIE, FL 34952 US

New Mailing Address:

10542 S FEDERAL HWY
PORT ST LUCIE, FL 34952 US

FEI Number: 20-5392025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PITTER, CARL S
7435 NORTH WEST 57TH STREET
TAMARAC, FL 33319 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ATTRIDGE, DONALD
Address: 1544 SOUTH EAST FACULTY COURT
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: T () Delete
Name: ATTRIDGE, DONALD
Address: 1544 SOUTH EAST FACULTY COURT
City-St-Zip: PORT LUCIE, FL 34952

Title: S () Delete
Name: ATTRIDGE, DONALD
Address: 1544 SOUTH EAST FACULTY COURT
City-St-Zip: PORT ST LUCIE, FL 34952 US

Title: D () Delete
Name: ATTRIDGE, DONALD
Address: 1544 SOUTH EAST FACULTY COURT
City-St-Zip: PORT ST LUCIE, FL 34952 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BENSON, JANETT
Address: 1544 SOUTH EAST FACULTY COURT
City-St-Zip: PORT LUCIE, FL 34952

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DONALD ATTRIDGE

P

05/02/2007

Electronic Signature of Signing Officer or Director

Date