

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000003356

FILED
Apr 30, 2008
Secretary of State

Entity Name: NETTA NAILS & HAIR BOUTIQUE, INC.

Current Principal Place of Business:

3106 NE 156 AVE.
GAINESVILLE, FL 326098838

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2374
GAINESVILLE, FL 326022374

New Mailing Address:

FEI Number: 20-8152255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NEAL, EDWIN D.
3106 NE 156 AVE.
GAINESVILLE, FL 326098838 US

Name and Address of New Registered Agent:

O'NEAL, EDWIN D
3106 NE 156 AVE.
GAINESVILLE, FL 326098838 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: EDWIN D. O'NEAL

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: O'NEAL, EDWIN D.
Address: 3106 NE 156 AVE.
City-St-Zip: GAINESVILLE, FL 326098838

Title: D () Delete
Name: O'NEAL JORDAN, MONICA
Address: P.O. BOX 435
City-St-Zip: GAINESVILLE, FL 326020435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EDWIN D. O'NEAL

D

04/30/2008

Electronic Signature of Signing Officer or Director

Date