

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000026570

**FILED**  
**Jan 15, 2008**  
**Secretary of State**

**Entity Name:** INTERNATIONAL ACADEMY OF COSMETOLOGY AND BARBERING INC

**Current Principal Place of Business:**

442 W KENNEDY BLVD  
SUITE 270  
TAMPA, FL 33606

**New Principal Place of Business:**

3040 CYPRESS STREET  
SUITE A  
TAMPA, FL 33609

**Current Mailing Address:**

PO BOX 21552  
TAMPA, FL 33622 US

**New Mailing Address:**

3705 NORTH HIMES AVE  
TAMPA, FL 33607

**FEI Number:** 20-8532610

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PRIETO, ANTONIO P  
4310 CARROLLWOOD VILLAGE DRIVE  
TAMPA, FL 33618 US

**Name and Address of New Registered Agent:**

PRIETO, ANTONIO P  
3705 NORTH HIMES AVE  
TAMPA, FL 33607 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: ANTHONY P. PRIETO

01/15/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PRIETO, ANTONIO P  
Address: 4310 CARROLLWOOD VILLAGE DRIVE  
City-St-Zip: TAMPA, FL 33618

Title: VP ( ) Delete  
Name: CORTES, ANNETTE  
Address: 1730 WINDSOR WAY  
City-St-Zip: TAMPA, FL 33619

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PRIETO, ANTONIO P  
Address: 3705 NORTH HIMES AVE.  
City-St-Zip: TAMPA, FL 33607

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: ANTONIO P. PRIETO

PRES

01/15/2008

Electronic Signature of Signing Officer or Director

Date