

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000073980

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: SOUTH BEACH BEAUTY SUPPLY, INC.

## Current Principal Place of Business:

13150 MORO COURT  
WINTER GARDEN, FL 34787

## New Principal Place of Business:

1124 WILD CHERRY LANE  
WELLINGTON, FL 33414

## Current Mailing Address:

13150 MORO COURT  
WINTER GARDEN, FL 34787

## New Mailing Address:

P.O. BOX 691312  
ORLANDO, FL 32869

FEI Number: 32-0258227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLARKE, CAROL A  
13150 MORO COURT  
WINTER GARDEN, FL 34787 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SOTO, YULIANA  
Address: 13150 MORO COURT  
City-St-Zip: WINTER GARDEN, FL 34787

Title: P ( ) Delete  
Name: CLARKE, CAROL A  
Address: 13150 MORO COURT  
City-St-Zip: WINTER GARDEN, FL 34787

Title: P ( ) Delete  
Name: COFFIE, SHARON  
Address: 13150 MORO COURT  
City-St-Zip: WINTER GARDEN, FL 34787

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CCLARKE

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date