

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P08000079565

**FILED**  
**Aug 01, 2011**  
**Secretary of State**

**Entity Name:** GLOBAL BEAUTY COLLECTION, INC.

**Current Principal Place of Business:**

250 181ST DRIVE  
APT 111  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

250 181ST DRIVE  
APT 111  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

19380 COLLINS AVENUE  
APT 1023  
SUNNY ISLES BEACH, FL 33160 US

**New Mailing Address:**

19380 COLLINS AVENUE  
APT 1023  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 26-3287506

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLER JIMENEZ, JAZMIN YADIRA  
250 181ST DRIVE APT 111  
SUNNY ISLES BEACH, FL 33160 US

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

SOLER JIMENEZ, JAZMIN YADIRA  
19380 COLLINS AVE  
APT 1023  
SUNNY ISLES BEACH, FL 33160 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:

08/01/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SOLER JIMENEZ, JAZMIN YADIRA  
Address: 19380 COLLINS AVENUE APT 1023  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: VP  
Name: ERIC, MORIN  
Address: 19380 COLLINS AVENUE APT 1023  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

I hereby 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 all other like empowered.

SIGNATURE: JAZMIN YADIRA SOLER JIMENEZ

P

08/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date