

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000107605

Entity Name: BEAUTY HOME USA, INC.

FILED
Mar 03, 2009
Secretary of State

Current Principal Place of Business:

3301 N COUNTRY DRIVE, APT 402
AVENTURA, FL 33180

New Principal Place of Business:

3375 N COUNTRY DRIVE,
1405
AVENTURA, FL 33180

Current Mailing Address:

3301 N COUNTRY DRIVE, APT 402
AVENTURA, FL 33180

New Mailing Address:

3375 N COUNTRY DRIVE,
1405
AVENTURA, FL 33180

FEI Number: 26-3995721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, MARIANO
3301 N COUNTRY DRIVE, APT 402
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

GONZALEZ, MARIANO
3375 N COUNTRY DRIVE,
1405
AVENTURA, FL 33180 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: MARIANO GONZALEZ

03/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GONZALEZ, MARIANO
Address: 3301 N COUNTRY DRIVE, APT 402
City-St-Zip: AVENTURA, FL 33180

Title: SD () Delete
Name: TORRES, ORietta
Address: 3301 N COUNTRY DRIVE, APT 402
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GONZALEZ, MARIANO
Address: 3375 N COUNTRY DRIVE, APT 1405
City-St-Zip: AVENTURA, FL 33180

Title: SD (X) Change () Addition
Name: TORRES, ORietta
Address: 3375 N COUNTRY DRIVE, APT 1405
City-St-Zip: AVENTURA, FL 33180

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: MARIANO GONZALEZ

PD

03/03/2009

Electronic Signature of Signing Officer or Director

Date