

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000084048

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** BEAUTY SUPPLY UNLIMITED, INC.

**Current Principal Place of Business:**

1819 HIGHLAND AVE., NORTH  
CLEARWATER, FL 33755

**New Principal Place of Business:**

1742 DREW STREET  
CLEARWATER, FL 33755

**Current Mailing Address:**

1819 HIGHLAND AVE., NORTH  
CLEARWATER, FL 33755

**New Mailing Address:**

1742 DREW STREET  
CLEARWATER, FL 33755

FEI Number: 59-3344044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEE, PONG HWA  
1819 HIGHLAND AVE., NORTH  
CLEARWATER, FL 34615 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: LEE, PONG HWA  
Address: 6440 72ND AVE., NORTH  
City-St-Zip: PINELLAS PARK, FL 34665

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: PONG H LEE

D

04/18/2011

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

\_\_\_\_\_ Date