2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000092336

Entity Name: FEMME COIFFURE, INC.

FILED Jul 19, 2006 Secretary of State

Current Principal Place of Business:		New Principal I	New Principal Place of Business:	
	LINS AVENUE			
229 BAL HARE	BOUR, FL 3315	54 US		
Current M	lailing Addres	s:	New Mailing A	ddress:
9700 COLI	LINS AVENUE			
229	BOUR, FL 3315	54 US		
	·		Ear () EEI Number Net Appliechte	() Contificate of Status Desired ()
FEI NUMBER	: 65-0712295	FEI Number Applied I	For () FEI Number Not Applicable	() Certificate of Status Desired ()
Name and	d Address of C	urrent Registered A	Agent: Name and Add	ress of New Registered Agent:
REBOH, G 9700 COLI 229	SABRIEL LINS AVENUE			
	BOUR, FL 3315	54 US		
	e named entity s e of Florida.	ubmits this statemer	nt for the purpose of changing its reg	gistered office or registered agent, or both,
SIGNATUR	RE:			
	Electron	ic Signature of Regis	stered Agent	Date
			ation did not receive the prior notice.	
Election Car	mpaign Financing	Trust Fund Contribution	on ().	IANGES TO OFFICEDS AND DIDECTORS.
Election Car		Trust Fund Contribution	on ().	IANGES TO OFFICERS AND DIRECTORS:
Election Car OFFICERS Title:	mpaign Financing S AND DIRECT	Trust Fund Contribution FORS: Delete	on (). ADDITIONS/CH Title:	IANGES TO OFFICERS AND DIRECTORS:
Election Car OFFICERS Title: Name:	mpaign Financing S AND DIRECT P () REBOH, RAPHA	Trust Fund Contribution TORS: Delete EL	on (). ADDITIONS/CH Title: Name:	
Election Car OFFICERS Title: Name: Address:	mpaign Financing S AND DIRECT	Trust Fund Contribution TORS: Delete JEL STREET	on (). ADDITIONS/CH Title:	
Election Car OFFICERS Title: Name: Address: City-St-Zip:	mpaign Financing S AND DIRECT P () REBOH, RAPHA 3194 N. E 211TI AVENTURA, FL	Trust Fund Contribution FORS: Delete EL H STREET 33180 US	on (). ADDITIONS/CH Title: Name: Address:	()Change ()Addition
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I hereby certify that the information supplied with this filing does not qualify for the 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: GABRIEL REBOH P 07/19/2006