2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000094696

FILED Dec 01, 2004 Secretary of State

Entity Name: KARLINE'S BEAUTY SPA OF THE PALM BEACHES, INC.

Current Principal Place of Business: New Principal Place of Business:

5516 CANYON WAY UNIT A 1900 OKEECOBEE BLVD WEST PALM BEACH, FL 33415

SUITE A8

WEST PALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

5516 CANYON WAY UNIT A 1900 OKEECHOBEE BLVD

SUITE A8 WEST PALM BEACH, FL 33415

WEST PALM BEACH, FL 33409

FEI Number: 65-0720378 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RICKETTS, KARLINE RICKETTS, KARLINE 1900 OKEÉCHOBEE BLVD. 1900 OKEÉCHOBEE BLVD.

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WEST PALM BEACH, FL 33415 US WEST PALM BEACH, FL 33409 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: TAKIYA GIBSON 12/01/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition RICKETTS, KARLINE RICKETTS, KARLINE Name: Name: 5516 CANYON WAY UNIT A 4117 HEATH CIRCLE SOUTH Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33407

Title: (X) Change () Addition Title: () Delete

Name: MACK, JEROME Name: MACK, JEROME

5516 CANYON WAY UNIT A 4117 HEATH CIRCLE SOUTH Address: Address: WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33407 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

GIBSON, TAKIYA C GIBSON, TAKIYA C Name: Name: 5516 CANNON WAY #A 1350 FERNLEA DRIVE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: WEST PALM BEACH, FL 33417

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TAKIYA GIBSON 0 12/01/2004