2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005
Secretary of State

DOCUMENT# P97000075248

Entity Name: PLAZA HAIR, INC.

Current Principal Place of Business:

11670 OAKHURST RD
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

11670 OAKHURST RD
LARGO, FL 33774

New Mailing Address:

FEI Number: 59-3466489 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ST. AMANT, A. PAUL
12323 145 LANE N.
LARGO, FL 33774 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ST. AMANT, A. PAUL
Address: 12323 145TH LANE N.
City-St-Zip: LARGO, FL 33774

Title: VPD ( ) Delete
Name: THIBODEAU, HENRY R
Address: 12323 145TH AVE N.
City-St-Zip: LARGO, FL 33774

Title: SD ( ) Delete
Name: PAPINEAU, RAYMOND
Address: 1517 SHIRLEY PL
City-St-Zip: LARGO, FL 33773

Title: TD (X) Delete
Name: PETERS, LAURA
Address: 12481 104TH AVE. N.
City-St-Zip: LARGO, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SDTD (X) Change ( ) Addition
Name: PAPINEAU, RAYMOND
Address: 1517 SHIRLEY PL
City-St-Zip: LARGO, FL 33773

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: A. PAUL ST AMANT PD 01/27/2005

Electronic Signature of Signing Officer or Director — Date