

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004532

FILED
Mar 03, 2006
Secretary of State

Entity Name: INDEPENDENT BEAUTY & BARBER SUPPLY, INC.

Current Principal Place of Business:

1906 WEST PLATT STREET
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

1906 WEST PLATT STREET
TAMPA, FL 33606 US

New Mailing Address:

FEI Number: 59-3491483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALDEZ, ROBERT E SR
1101 LAKE CHARLES CIRCLE
LUTZ, FL 33549 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: P () Delete
Name: VALDEZ, ROBERT E SR
Address: 1101 LAKE CHARLES CIRCLE
City-St-Zip: LUTZ, FL 33549

Title: VP () Delete
Name: VALDEZ, ROBERT E JR
Address: 3119 W. KNIGHTS AVE.
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: VALDEZ, ROBERT E JR
Address: 2839 BAYSHORE TRAILS
City-St-Zip: TAMPA, FL 33611

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: ROBERT VALDEZ SR.

P

03/03/2006

Electronic Signature of Signing Officer or Director

Date