## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Apr 23, 2004 08:00 AM Secretary of State DOCUMENT # P98000086750 Entity Name BEAUTY & BEAUTY, INC. Mailing Address Principal Place of Business 836 NW 183 STREET 836 NW 183 STREET MIAMI, FL 33169 MIAMI, FL 33169 CR2E034 (10/03) 04182004 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0877693 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KIM, JEE YOUNG DO NOT WRITE 836 NW 183 STREET MIAMI, FL 33169 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. U000000127197 Added to Fees OFFICERS AND DIRECTORS 10. TITLE KIM, JEE YOUNG NAME 836 NW 183 STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33169 TITLE STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNING OFFICER OR DIRECTOR