

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000015252

FILED  
May 03, 2004  
Secretary of State

Entity Name: FACIAL ACCENTS BY LEANNE, INC.

## Current Principal Place of Business:

3500 E FLETCHER AVE  
STE 308  
TAMPA, FL 33613

## New Principal Place of Business:

15243 AMBERLY DRIVE  
SOMMERSET PROFESSIONAL PARK  
TAMPA, FL 33647 US

## Current Mailing Address:

3500 E FLETCHER AVE  
STE 308  
TAMPA, FL 33613

## New Mailing Address:

15243 AMBERLY DRIVE  
SOMMERSET PROFESSIONAL PARK  
TAMPA, FL 33647 US

FEI Number: 59-3558656

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WATKINS, CARL T  
7345 JACKSON SPRINGS ROAD  
TAMPA, FL 33634 US

## Name and Address of New Registered Agent:

WATKINS, CARL T  
5103 MEMORIAL HIGHWAY  
TAMPA, FL 33634 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: CARL T. WATKINS

05/03/2004

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:

Title: D ( ) Delete  
Name: CARTER, LEANNE  
Address: 5125 PALM SPRINGS BLVD APT 1206  
City-St-Zip: TAMPA, FL 33647

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CARTER, LEANNE  
Address: 18973 DUQUESNE DRIVE  
City-St-Zip: TAMPA, FL 33647

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: LEANNE CARTER

D

05/03/2004

Electronic Signature of Signing Officer or Director

Date