2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007
Secretary of State

DOCUMENT# P99000033210

Entity Name: HAIR STUDIO 2000, INC.

Current Principal Place of Business:

1634 S.E. 47TH STREET
CAPE CORAL, FL 33904

New Principal Place of Business:

1918 DEL PRADO BLVD
CAPE CORAL, FL 33990

Current Mailing Address:

P.O. BOX 100704
CAPE CORAL, FL 33910

New Mailing Address:

FEI Number: 65-1010058 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EDY, WILLIAM T ESQ.
201 NICHOLAS PARKWAY WEST
CAPE CORAL, FL 33991 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: RIVERA, BETTY
Address: P.O. BOX 100704
City-St-Zip: CAPE CORAL, FL 33910

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RIVERA, BETTY
Address: 4144 COUNTRY CLUB BLVD
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Change (X) Addition
Name: SMITH, STEVE
Address: 4002 CORONADO PARKWAY
City-St-Zip: CAPE CORAL, FL

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: BETTY RIVERA P 03/20/2007

Electronic Signature of Signing Officer or Director — Date