

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000057896

FILED
Jul 14, 2005
Secretary of State

Entity Name: FEMME BEAUTY PRODUCTS, INC.

Current Principal Place of Business:

432 PLAZA REAL
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

432 PLAZA REAL
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-1095457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REBOH, GABRIEL
9970 COLLINS AVENUE, SUITE 229
BAL HARBOUR, FL 33154 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

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: PD () Delete
Name: REBOH, GABRIEL
Address: 9380 BAY DRIVE
City-St-Zip: SURFSIDE, FL 33154

Title: VD () Delete
Name: REBOH, RAPHAEL
Address: 3194 NE 211 STREET
City-St-Zip: AVENTURA, FL 33180

Title: TD () Delete
Name: REBOH, MARCEL
Address: 290 BAL BAY DRIVE #305
City-St-Zip: BAL HARBOUR, FL 33154

Title: SD () Delete
Name: REBOH, DANIEL
Address: 10275 COLLINS AVENUE #1220-S
City-St-Zip: MIAMI, FL 33154

Title: D () Delete
Name: BORDEN, FLORY
Address: 10275 COLLINS AVENUE #1417
City-St-Zip: MIAMI, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REBOH, GABRIEL
Address: 9364 BAY DRIVE
City-St-Zip: SURFSIDE, FL 33154

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

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

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

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: GABRIEL REBOH

P

07/14/2005

Electronic Signature of Signing Officer or Director

Date