

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90037 040 ***150.00

DOCUMENT # P99000061036

1. Entity Name
SOUTH BEAUTY SUPPLIES, INC.



Principal Place of Business
**2966 S.W. 8TH ST.
MIAMI, FL 33135**

Mailing Address
**2966 S.W. 8TH ST.
MIAMI, FL 33135**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

03212007 Chg-P CR2E034 (12/06)

4. FEI Number
65-0934328

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VIZCAYA, VICTOR
2966 S.W. 8TH ST.
MIAMI, FL 33135**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PVST
VIZCAYA, VICTOR
2966 S.W. 8TH ST.
MIAMI, FL 33135** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
VIZCAYA, VICTOR
2966 S.W. 8TH ST.
MIAMI, FL 33135** ☐ Delete

TITLE
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CITY - ST - ZIP
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
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CITY - ST - ZIP
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

PRG/LLP/1
VICTOR VIZCAYA 3/22/07 (305) 649-6284