

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000073198

FILED  
Feb 23, 2005  
Secretary of State

Entity Name: KENIA'S UNIXE BEAUTY SALON INC.

**Current Principal Place of Business:**

1615 NE 163 STREET  
N MIAMI, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

1615 NE 163 STREET  
N MIAMI, FL 33162

**New Mailing Address:**

FEI Number: 43-2075039      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

BLANCO, KENIA  
535 NW 116TH TERR.  
MIAMI, FL 33162      US

**Name and Address of New Registered Agent:**

TAVERA, TERESA C  
1740 S. GLADES DRIVE #7  
NORTH MIAMI BEACH, FL 33162      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: TERESA TAVERA      02/23/2005  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: BLANCO, KENIA  
Address: 535 NW 116TH ST.  
City-St-Zip: MIAMI, FL 33132

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P      (X) Change ( ) Addition  
Name: TAVERA, MINERVA  
Address: 1740 S. GLADES DRIVE  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: P      ( ) Change (X) Addition  
Name: TAVERA, TERESA C  
Address: 1740 S. GLADES DRIVE #7  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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: TERESA TAVERA      P      02/23/2005  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date