2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V67675

Entity Name: FOR MEN ONLY SALON, INC.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 SUNRISE AVE STE 0101 100 SUNRISE AVE SUITE C-4

PALM BEACH, FL 33480 PALM BEACH, FL 33480

Current Mailing Address: New Mailing Address:

100 SUNRISE AVE 100 SUNRISE AVE

STE 0101 SUITE C-4
PALM BEACH, FL 33480 PALM BEACH, FL 33480

ALIVI BEACH, LE 33400

FEI Number: 65-0367817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SACCO, DENNIS C PRES 100 SUNRISE AVE STE 101

PALM BEACH, FL 33480 US

SACCO, DENNIS C PRES 12716 WOODMILL DR PALM BEACH GARDENS, FL 33418 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: 01/04/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: PRES (X) Change () Addition

 Name:
 SACCO, DENNIS C,
 Name:
 SACCO, DENNIS C,

 Address:
 100 SUNRISE AVE
 Address:
 12716 WOODMILL DR

City-St-Zip: PALM BEACH, FL 33480 PB City-St-Zip: PALM BEACH GARDENS, FL 33418 PB

Title: D () Delete Title: VP (X) Change () Addition

 Name:
 SACCO, ROSEANN
 Name:
 SACCO, ROSEANN

 Address:
 100 SUNRISE AVE
 Address:
 12716 WOODMILL DR

City-St-Zip: PALM BEACH, FL 33480 PB City-St-Zip: PALM BEACH GARDENS, FL 33418 PB

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: DENNIS SACCO PRES 01/04/2005