

No. C 181682		Due no later than Jan 31, 2016		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. PRO'S CHOICE BEAUTY CARE, INC. 35 SAWGRASS DRIVE SUITE 3 BELLPORT NY 11713		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
				3. <u>New</u> Registered Agent Signature:*			
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
PRESIDENT	MICHAEL ROSS	35 SAWGRASS DRIVE SUITE 3	BELLPORT	NY	USA	11713	
SECRETARY	MAY CHROMEY	35 SAWGRASS DRIVE SUITE 3	BELLPORT	NY	USA	11713	
TREASURER	MAY CHROMEY	35 SAWGRASS DRIVE SUITE 3	BELLPORT	NY	USA	11713	
DIRECTOR	RUTH NUSSDORF	35 SAWGRASS DRIVE SUITE 3	BELLPORT	NY	USA	11713	
5. Organized Under the Laws of: NJ C 181682		6. Annual Report must be signed.* Signature: MAY CHROMEY Name (type or print): MAY CHROMEY Date: 01/15/2016 Title: SECRETARY					
Processed 01/15/2016		* Electronically provided signatures are accepted as original signatures.					