2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127247

Entity Name: HAIR COMPANY OF TARPON SPRINGS LLC

FILED Feb 12, 2009 Secretary of State

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

35160 US HWY 19 NORTH 40946 US HWY 19 N

PALM HARBOR, FL 34683 TARPON SPRINGS, FL 34689

Current Mailing Address: New Mailing Address:

35160 US HWY 19 NORTH 40946 US HWY 19 N

PALM HARBOR, FL 34683 TARPON SPRINGS, FL 34689

FEI Number: 26-1672217 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:

BRUNO, MICHAEL 600 BYPASS DRIVE 115

CLEARWATER, FL 33764 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:KMG MANAGEMENT GROUP, INCName:AD HOWELLS LLC,Address:35160 US HWY 19 NORTHAddress:11046 OYSTERBAY CIRCLECity-St-Zip:PALM HARBOR, FL 34683City-St-Zip:NEW PORT RICHEY, FL 34654

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 AD HOWELLS LLC,
 Name:

 Address:
 11046 OYSTERBAY CIRCLE
 Address:

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ANGELA ZUCCARO MGRM 02/12/2009