

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107195

FILED
Apr 06, 2010
Secretary of State

Entity Name: BURKE & CO. FAMILY HAIR CARE, LLC

Current Principal Place of Business:

SR 65 SOUTH
HOSFORD, FL 32334

New Principal Place of Business:

Current Mailing Address:

17996 NE ARNOLD KELLY RD
HOSFORD, FL 32334

New Mailing Address:

FEI Number: 26-3723168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKE, EUGENIA
17996 NE ARNOLD KELLY RD
HOSFORD, FL 32334 US

Name and Address of New Registered Agent:

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:

Title: MGRM
Name: BURKE, EUGENIA
Address: 17996 NE ARNOLD KELLY RD
City-St-Zip: HOSFORD, FL 32334

I hereby 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: EUGENIA BURKE

MGR

04/06/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date