

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066639

Entity Name: SALON MENAGE, INC.

FILED
Mar 25, 2008
Secretary of State

Current Principal Place of Business:

3976 WEST 16 AVENUE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

3976 WEST 16 AVENUE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 82-0549707

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VELAZQUEZ, JOHANNY B
3976 W. 16 AVENUE
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

DEVOS, TAMARA
3976 W. 16 AVENUE
HIALEAH, FL 33012 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: DEVOS DEVOS

03/25/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: CARRALERO, BEATRIZ C
Address: 3976 W 16 AVE.
City-St-Zip: HIALEAH, FL 33012

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DEVOS, TAMARA
Address: 3976 WEST 16 AVE.
City-St-Zip: HIALEAH, FL 33012 US

Title: VP () Change (X) Addition
Name: TORRES, ABNER A
Address: 3976 WEST 16 AVE.
City-St-Zip: HIALEAH, FL 33012 US

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 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: TAMARA DEVOS

P

03/25/2008

Electronic Signature of Signing Officer or Director

Date