

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000006850

FILED
Feb 09, 2009
Secretary of State

Entity Name: NICOLE BRIGANDI HAIR DESIGN, INC.

Current Principal Place of Business:

3318 21ST STREET SW
LEHIGH ACRES, FL 33971

New Principal Place of Business:

3318 21ST STREET SW
LEHIGH ACRES, FL 33976

Current Mailing Address:

3318 21ST STREET SW
LEHIGH ACRES, FL 33971

New Mailing Address:

3318 21ST STREET SW
LEHIGH ACRES, FL 33976

FEI Number: 26-1702164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWAN, LAWRENCE
709 CAPE CORAL PKWY
CAPE CORAL, FL 33914 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BRIGANDI, NICOLE
Address: 3318 21ST STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: DVST () Delete
Name: BRIGANDI, NICOLE
Address: 3318 21ST STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BRIGANDI, NICOLE
Address: 3318 21ST STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

Title: DVST (X) Change () Addition
Name: BRIGANDI, NICOLE
Address: 3318 21ST STREET SW
City-St-Zip: LEHIGH ACRES, FL 33976

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: NICOLE BRIGANDI

DP

02/09/2009

Electronic Signature of Signing Officer or Director

Date