

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000083749

FILED
Mar 24, 2008
Secretary of State**Entity Name:** A DROP OF SUN ,TANNING & BODY SALON INC.**Current Principal Place of Business:**2791 OLD WINTER GARDEN ROAD
OCOE, FL 34761**New Principal Place of Business:****Current Mailing Address:**2791 OLD WINTER GARDEN ROAD
OCOE, FL 34761**New Mailing Address:**2003 ADAIR ST
OCOE, FL 34761**FEI Number:** 20-5105091**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BRADLEY, PRUCHA J
3716 SEMINOLE STREET
GOTHA, FL 34734 US**Name and Address of New Registered Agent:**BRAVO, CHERELYN J
2003 ADAIR ST
OCOE, FL 34761 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: CHERELYN BRAVO

03/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRADLEY, PRUCHA J
Address: 3716 SEMINOLE STREET
City-St-Zip: GOTHA, FL 34734

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRAVO, CHERELYN J
Address: 2003 ADAIR ST
City-St-Zip: OCOE, FL 34761

Title: VP () Change (X) Addition
Name: VIGNATI, CANDICE
Address: 2003 ADAIR ST
City-St-Zip: OCOE, FL 34761

Title: S () Change (X) Addition
Name: FITZGERALD, CAHERINE
Address: 2003 ADAIR ST
City-St-Zip: OCOE, FL 34761

Title: T () Change (X) Addition
Name: DELAROSA, TARA
Address: 7049 SAWMILL CIR
City-St-Zip: OCOE, FL 34761

Title: O () Change (X) Addition
Name: FITZGERALD, KELLY
Address: 1513 PRAIRIE LAKE
City-St-Zip: OCOE, FL 34761

Title: O () Change (X) Addition
Name: LAMELA, LISA
Address: 2003 ADAIR ST
City-St-Zip: OCOE, FL 34761

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: CHERELYN BRAVO

P

03/24/2008

Electronic Signature of Signing Officer or Director

Date