

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012823

FILED
Mar 26, 2008
Secretary of State

Entity Name: SALON TRIO, L.L.C.

Current Principal Place of Business:

12515 SOUTH DIXIE HIGHWAY
MIAMI, FL 33156

New Principal Place of Business:

12515 SOUTH DIXIE HIGHWAY
PINECREST, FL 33156 US

Current Mailing Address:

12515 SOUTH DIXIE HIGHWAY
MIAMI, FL 33156

New Mailing Address:

12515 SOUTH DIXIE HIGHWAY
PINECREST, FL 33156

FEI Number: 65-1051958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRONGOLD, RANDI M ESQ.
% KRONGOLD, TODD & SINGER, P.L.
201 ALHAMBRA CIRCLE, SUITE 801
CORAL GABLES, FL 33134 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 () Delete
Name: TEJERA, NANCY
Address: 7290 SW 140 TERRACE
City-St-Zip: MIAMI, FL 33158

Title: MGR () Delete
Name: DIEGO, JENNIFER P
Address: 18701 SW 94 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: MGR () Delete
Name: WORTON, MARY K
Address: 16600 SW276 ST.
City-St-Zip: HOMESTEAD, FL 33031

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: MARY K WORTON

MGRM

03/26/2008

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