

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 654696

Entity Name: A-1 BEAUTY SHOP, INC.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

A-1 BEAUTY SHOP INC
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

1415 FIRST STREET
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 59-2101923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIGGS, NIDIA BORDERS
2121 HARRIS AVENUE
KEY WEST, FL 33040 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: PD () Delete
Name: RIGGS, NIDIA BORDERS
Address: 2121 HARRIS AVE
City-St-Zip: KEY WEST, FL

Title: D () Delete
Name: COMLOH, BARBARA A
Address: LOT 4, KEY WEST VILLAS
City-St-Zip: KEY WEST, FL

Title: AT () Delete
Name: HOFFMAN, JOANNA B.
Address: 2121 HARRIS AVENUE
City-St-Zip: KEY WEST, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: RIGGS, NIDIA BORDERS

PD

04/15/2009

Electronic Signature of Signing Officer or Director

_____ Date