

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090622

Entity Name: PAM'S BLACK MAGIC HAIR SALON, LLC

Current Principal Place of Business:

4550 24TH AVE UNIT 115
VERO BEACH, FL 32967

Current Mailing Address:

5514 SHANNON DRIVE
FORT PIERCE, FL 34951

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARR, PAMELA
5514 SHANNON DRIVE
FORT PIERCE, FL 34951 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MAN
Name FARR, PAMELA R
Address 5514 SHANNON DRIVE
City-State-Zip: FORT PIERCE FL 34951

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAMELA R FARR

MAN

04/29/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date