

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000022347

**Entity Name:** SALON SUPPLEMENTS LLC

**Current Principal Place of Business:**

9892 CORONADA LAKE DRIVE  
BOYNTON BEACH, FL 33437

**Current Mailing Address:**

C/O 665 SE 10TH STREET  
201  
DEERFIELD BEACH, FL 33441 US

**FEI Number:** 27-5152874

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DELGADO, ANGELA  
665 SE 10TH STREET  
201  
DEERFIELD BEACH, FL 33441 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 MGRM  
Name DEROSA, PETER  
Address 12 NE 4TH AVE  
City-State-Zip: DELRAY BEACH FL 33483

Title MGRM  
Name HASCHE, MARK  
Address 12 NE 4TH AVE  
City-State-Zip: DELRAY BEACH FL 33483

Title MGRM  
Name HEIT, ERIN  
Address 9892 CORONADA LAKE DRIVE  
City-State-Zip: BOYNTON BEACH FL 33437

*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:** ERIN HEIT

MGRM

02/27/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date