

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001992

FILED
Jan 13, 2010
Secretary of State

Entity Name: AVEDA EXPERIENCE CENTERS INC.

Current Principal Place of Business:

7 CORPORATE CENTER DRIVE
MELVILLE, NY 117473166

New Principal Place of Business:

Current Mailing Address:

7 CORPORATE CENTER DRIVE
ATTN: TAX DEPARTMENT
MELVILLE, NY 117473166

New Mailing Address:

FEI Number: 11-3527014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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
Name: NILS CONSEIL, DOMINIQUE
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: SVCF
Name: KUNES, RICHARD
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: EVP
Name: MOSS, SARA J
Address: 7 CORPORATE CENTER DR.
City-St-Zip: MELVILLE, NY 11747

Title: D
Name: MOSS, SARA
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: AS
Name: SCHWECHERL, JAMES
Address: 7 CORPORATE CENTER DRIVE
City-St-Zip: MELVILLE, NY 11747

Title: AS
Name: CAPPELL, LISA
Address: 7 CORPORATE CENTER DR.
City-St-Zip: MELVILLE, NY 11747

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 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 all other like empowered.

SIGNATURE: JAMES SCHWECHERL

ASEC

01/13/2010

Electronic Signature of Signing Officer or Director

Date