

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13982

Entity Name: MR. VITO'S HAIR ODYSSEY, INC.

FILED  
Mar 25, 2011  
Secretary of State

**Current Principal Place of Business:**

9110 WILES ROAD  
CORAL SPRINGS, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

9110 WILES ROAD  
CORAL SPRINGS, FL 33067

**New Mailing Address:**

FEI Number: 59-2060029

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLANCATO, CARYL  
9110 WILES RD  
CORAL SPRINGS, FL 33067 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BLANCATO, CARYL  
Address: 9049 TREMEZZO LANE  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP  
Name: MURRAY, JOANNE B  
Address: 3733 NW 63 CT  
City-St-Zip: COCONUT CREEK, FL 33073

Title: S  
Name: BLANCATO, VITO L  
Address: 11743 SW MOUNTAIN ASH CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: JOANNE MURRAY

VP

03/25/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date