1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F40930

1. Corporation Name

SALON SALON, INC.

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90023 044 ***150.00



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Principal Place of Business Mailing Address						- (
SALON SALON INC., C/O L. PANARELLA			SALON SALON INC., C/O L. PANARELLA				
2580 ARBORETUM CIRCLE			2580 ARBORETUM CIRCLE				
SARASOTA FL 34232			SARASOTA FL 34232				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualifed
						u	08/19/1981
2. Principal Place of Business			2a. Mailing Address				4. FEI Number Applied For
21			Suite, Apt. #, etc.				59-2132311 Not Applicable \$8.75 Additional
Suite, Apt. #, etc.			¬ · · · ·				5. Certificate of Status Desired Fee Required
22 City & State			City & State			- ·	
_ City.& State · · · ·			28				6. Election Campaign Financing 55.00 May Be Trust Fund Contribution Added to Fees
Zip Country			Zip Country				This corporation owes the current year Intangible
			29 30				Personal Property Tax.
24	9. Name and Address of Current	11				***	10. Name and Address of New Registered Agent
	o. Hame and Madical of Carrent	110811		8	1	Name	
PANARELLA, LEONARD					_		
2580 ARBORETUM CIRCLE SARASOTA FL 34232					2	Street Addre	ss (P.O. Box Number is Not Acceptable)
					3		144-114-114-114-114-114-114-114-114-114
				84	4	City	FL 85 Zip Code
44 Dusquant	to the provisions of Sections 607 0503	and 6	07 1508 Florida Statutes	the abov	Ve-	named como	ration submits this statement for the purpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered agent	and title	if applicable (NOTE: Re-	gistered Ag	ent :	signature required	when reinstating) DATE
12.	OFFICERS AND			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		☐ DELETE	1.1 TITLE	_		Change Addition
NAME	PANARELLA, LEONARD			1.2 NAME			
STREET ADDRESS	2580 ARBORETUM CIRCLE			1.3 STREET		NDDRESS	
CITY+ST-ZIP	SARASOTA, FL 0			1.4 C!TY-ST-ZIF		ZIP .	
TITLE	CEO		☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	PANARELLA, SUSAN			2.2 NAME			
STREET ADDRESS	2580 ARBORETUM CIRCLE			2.3 STREET		NDORESS	
CITY-ST-ZIP	SARASOTA FL			2.4 CITY-S		l l	₹ `
TITLE	STD		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME '	PANARELLA, LORETTA		: 45	3.2 NAME			· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS	2580 ARBOREATUM CIRCLE			3.3 STREET		ADDRESS	
CITY-ST-ZIP	SARASOTA FL			3.4. CITY-			
TITLE	WE CHINESE TEN		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAMI	E		
STREET ADDRESS						NDDRESS	
CITY-ST-ZIP				4.4 CITY-		[
TITLE	- · · · · · · · · · · · · · · · · · · ·		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STRE	ET A	ADDRESS	
CITY-ST-ZIP				5.4 CITY-	ST-	ZIP	
TITLE			☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME				6.2 NAME	Ę		
STREET ADDRESS				6.3 STRE	ET A	ADDRESS	
J.11.5.1. ADDISESS				SACITY.	ст	7ID	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: