

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J00206

Entity Name: SALLY - R, INC.

FILED
Jan 22, 2006
Secretary of State

Current Principal Place of Business:

245 CORNELL RD
SAINT AUGUSTINE, FL 32086 US

New Principal Place of Business:

316 C ST.
SAINT AUGUSTINE, FL 32080 US

Current Mailing Address:

1660 COUNTY ROAD 214
SAINT AUGUSTINE, FL 32084 US

New Mailing Address:

316 C ST.
SAINT AUGUSTINE, FL 32080 US

FEI Number: 59-2777611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHNIAK, ANTHONY L
1660 C.R. 214
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

HUNSICKER, WILLIAM E
316 C ST.
SAINT AUGUSTINE, FL 32080 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: WILLIAM E. HUNSICKER

01/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVD () Delete
Name: MICHNIAK, ANTHONY
Address: 1660 COUNTY ROAD 214
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change () Addition
Name: HUNSICKER, WILLIAM E
Address: 316 C ST.
City-St-Zip: SAINT AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WILLIAM E. HUNSICKER

PRES

01/22/2006

Electronic Signature of Signing Officer or Director

Date