

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K58576

Entity Name: R & P HAIR, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

3234 NE 12TH AVE
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

3234 NE 12TH AVE
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-0093822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASHCROFT, RANDALL
2701 NORTH OCEAN BOULEVARD, NO. 6-A
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

ASHCROFT, RANDALL
3503 OAKS WAY 511
POMPANO BEACH, FL 33069 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: RANDALL L ASHCROFT

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ASHCROFT, RANDALL
Address: 3503 OAKS WAY 511
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: KNODE, PAUL
Address: 3503 OAKS WAY 511
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RANDALL L ASHCROFT

D

04/28/2009

Electronic Signature of Signing Officer or Director

Date