## 2007 LIMITED LIABILITY COMPANY

## **FILED ANNUAL REPORT** Apr 10, 2007 08:00 All Secretary of State **DOCUMENT # L01000014509** 1. Entity Name SALON EXCEL, L.L.C. Mailing Address Principal Place of Business 2033 MAIN ST., STE. 600 2033 MAIN ST., STE. 600 SARASOTA, FL 34237 SARASOTA, FL 34237 04052007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1147480 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PFLUGNER, J GEOFFREY DO NOT WRITE 2033 MAIN STREET SUITE 600 IN THIS SPACE SARASOTA, FL 34237 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MLE MGR CALIRO, ROBERT **6717 ROXBURY DRIVE** STREET ADDRESS SARASOTA, FL 34231 CITY-ST-ZIP U00000698137 TITLE 04/18/07-80068-016 50.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE 7ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature, shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of the execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE