

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020673

FILED  
Apr 05, 2005  
Secretary of State

Entity Name: GLOB' HAIR, LLC

**Current Principal Place of Business:**

911 E. PONCE DE LEON BLVD  
1604 PH  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

61 MIRACLE MILE  
CORAL GABLES, FL 33134 US

**Current Mailing Address:**

911 E. PONCE DE LEON BLVD  
1604 PH  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

61 MIRACLE MILE  
CORAL GABLES, FL 33134 US

FEI Number: 65-1156565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALDES-FAULI CORPORATE SERVICES, INC.  
2 S. BISCAYNE BLVD.  
SUITE 3400  
MIAMI, FL 33131 US

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

MAHIEU, DIDIER G MGR  
61 MIRACLE MILE  
CORAL GABLES, FL 33134 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: MAHIEU, DIDIER

04/05/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: MAHIEU, DIDIER  
Address: 911 E. PONCE DE LEON BLVD, 1604PH  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR (X) Delete  
Name: VIMONT, ALAIN  
Address: 911 E. PONCE DE LEON BLVD, 1604PH  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MAHIEU, DIDIER  
Address: 61 MIRACLE MILE  
City-St-Zip: CORAL GABLES, FL 33134 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MAHIEU, DIDIER

MGR

04/05/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date