

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004909

**FILED**  
**Jan 19, 2004**  
**Secretary of State**

**Entity Name:** SALONZ HOLLYWOOD, LLC

**Current Principal Place of Business:**

19300 NW 10TH STREET  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

4921 SHERIDAN STREET  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

19300 NW 10TH STREET  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

PO BOX 327344  
FORT LAUDERDALE, FL 33332

FEI Number: 22-3894659

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FINER, MARC  
19300 NW 10TH STREET  
PEMBROKE PINES, FL 33029

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: SALONZ HOLDING, LLC,  
Address: 19300 NW 10TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33029

**ADDITIONS/CHANGES:**

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: MARC FINER

MGR

01/19/2004

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