2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000038804

1. Entity Name
THE MANE STOP SALON AND SPA, LLC

Principal Place of Business	Mailing Address
243 PLUMOSA AVENUE MERRITT ISLAND, FL 32953	6761 CECIL ROAD COCOA, FL 32927

DO NOT WRITE IN THIS SPACE

03042008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
02-0709336	Not Applicable
5. Certificate of Status Desired ☐	$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RIGGS, TERESA
6761 CECIL ROAD
COCOA, FL 32927

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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

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	GUNDE, CLARA
STREET ADDRESS	2002 MUCKINGUM AVENUE
CITY-ST-ZIP	COCOA, FL 32926
TITLE	MGRM
NAME	RIGGS, TERESA
STREET ADDRESS	6761 CECIL ROAD
CITY-ST-ZIP	COCOA, FL 32927
TITLE	MGRM
NAME	PARSONS, TRACY
STREET ADDRESS	1339 NELSON CT.
CITY-ST-ZIP	ROCKLEDGE, FL 32956
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000889052
04/22/08-80037-011 138.75

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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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _Teresa Riggs_   TERESA RIGGS   3-10-08