

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041792

FILED  
Apr 06, 2006  
Secretary of State

Entity Name: HAIR COLOR CENTER III, LLC

**Current Principal Place of Business:**

1203 NORTHVIEW DRIVE  
SARASOTA, FL 34242

**New Principal Place of Business:**

**Current Mailing Address:**

2033 MAIN STREET  
SUITE 600  
SARASOTA, FL 34237

**New Mailing Address:**

FEI Number: 60-0005286      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PFLUGNER, J. GEOFFREY  
2033 MAIN STREET, SUITE 600  
SARASOTA, FL 34237 US

**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/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CASO, ANGELO A  
Address: 1203 NORTHVIEW DRIVE  
City-St-Zip: SARASOTA, FL 34242

Title: MGRM ( ) Delete  
Name: CASO, LESLEY B  
Address: 1203 NORTHVIEW DRIVE  
City-St-Zip: SARASOTA, FL 34242

**ADDITIONS/CHANGES:**

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 for the exemption stated in Chapter 119, 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: ANGELO A CASO      MGRM      04/06/2006

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