

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000050910

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** HAIR OFF FIRST, LLC

**Current Principal Place of Business:**

89 9TH ST SOUTH  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

89 9TH ST SOUTH  
NAPLES, FL 34102

**New Mailing Address:**

**FEI Number:** 58-2677941

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIEBERFARB, JUDITH  
89 9TH ST SOUTH  
NAPLES, FL 34102 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:** MGR  
**Name:** LIEBERFARB, JUDITH  
**Address:** 89 9TH ST SOUTH  
**City-St-Zip:** NAPLES, FL 34102

**Title:** MGR  
**Name:** BERMAN, VIRGINIA  
**Address:** 89 9TH ST SOUTH  
**City-St-Zip:** NAPLES, FL 34102

I hereby 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:** JUDITH LIEBERFARB

MGR

02/18/2010

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