

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094093

FILED
Aug 26, 2008
Secretary of State

Entity Name: PURE ELEGANCE HAIR STUDIO, LLC

Current Principal Place of Business:

2814 WESTON ROAD
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

2814 WESTON ROAD
WESTON, FL 33331

New Mailing Address:

FEI Number: 20-2074235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BLODIG, GREGORY J
100 W CYPRESS CREEK ROAD, SUITE 700
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

SILECCHIA, JOSEPH
2814 WESTON ROAD
WESTON, FL 33331 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: JOSEPH SILECCHIA

08/26/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SILECCHIA, JOSEPH
Address: 11076 LONGBOAT DRIVE
City-St-Zip: COOPER CITY, FL 33026

Title: MGR () Delete
Name: PIETROFORTE, JOSEPHINE
Address: 16993 S.W. 38TH STREET
City-St-Zip: MIRAMAR, FL 33027

Title: MGR () Delete
Name: GATTO, KEALLY
Address: 2100 N.W. 103RD AVENUE
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SILECCHIA, JOSEPH
Address: 2814 WESTON ROAD
City-St-Zip: WESTON, FL 33331 US

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 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: JOSEPH SILECCHIA

MGR

08/26/2008

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