## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000001638

Entity Name: BEAUTY PLUS SALON, LLC

FILED Apr 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

305 BROADWAY AVE 301 BROADWAY AVE

KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 US US

**Current Mailing Address: New Mailing Address:** 

4021 BOUGAINVILLEA PLACE 305 BROADWAY AVE KISSIMMEE, FL 34741 US KISSIMMEE, FL 34746 US

FEI Number: 20-4055597 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RIVERA, ERNESTO RIVERA, ERNESTO 4021 BOUGAINVILLEA PLACE 22 AMAFIL WAY

KISSIMMEE, FL 34758 US KISSIMMEE, FL 34746

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: ERNESTO RIVERA 04/25/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

( ) Delete MGR Title: (X) Change ( ) Addition

RIVERA, ERNESTO RIVERA, ERNESTO Name: Name: Address: 22 AMALFI WAY Address: 4021 BOUNGAINVILLEA PLACE

City-St-Zip: KISSIMMEE, FL 34758 City-St-Zip: KISSIMMEE, FL 34746

Title: MGR ( ) Delete Title: () Change () Addition

Name: DIAZ, JULIO Name: Address: 122 BIRMINGHAM DR Address: City-St-Zip: KISSIMMEE DRIVE, FL 34758 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: ERNESTO RIVERA 04/25/2007