

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000049221

FILED
Apr 30, 2007
Secretary of State

Entity Name: HAIR COLOR BY LINDA LIMITED LIABILITY COMPANY

Current Principal Place of Business:

32765 PENNSYLVANIA AVE
SAN ANTONIO, FL 33576

New Principal Place of Business:

32765 PENNSYLVANIA AVE
SAN ANTONIO, FL 33576 US

Current Mailing Address:

17605 PALOMINO LAKE DRIVE
DADE CITY, FL 335231924

New Mailing Address:

17605 PALOMINO LAKE DRIVE
DADE CITY, FL 335231924 US

FEI Number: 26-2131086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREIBELBIS, BRYAN LEE
17605 PALOMINO LAKE DRIVE
DADE CITY, FL 335231924 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 () Delete
Name: DREIBELBIS, LINDA ANN
Address: 32765 PENNSYLVANIA AVE
City-St-Zip: SAN ANTONIO, FL 33576

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DREIBELBIS, LINDA ANN
Address: 32765 PENNSYLVANIA AVE
City-St-Zip: SAN ANTONIO, FL 33576 US

Title: MGR () Change (X) Addition
Name: DREIBELBIS, BRYAN L MGR
Address: 17605 PALAMINO LAKE DRIVE
City-St-Zip: DADE CITY, FL 33523 US

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: LINDA ANN DREIBELBIS

MGRM

04/30/2007

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