

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122682

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** RSVP MAGIC SALON & HAIR DESIGN LLC

**Current Principal Place of Business:**

7000 W ATLANTIC AVE.  
DELRAY BEACH, FL 33446

**New Principal Place of Business:**

**Current Mailing Address:**

6601 NW 23RD WAY  
BOCA RATON, FL 33496

**New Mailing Address:**

**FEI Number:** 20-8268972      **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:**

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

SALES, MARIE A  
7000 W ATLANTIC AVE.  
DELRAY BEACH, FL 33446      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SALES, MARIE  
Address: 6601 NW 23RD WAY  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM ( ) Delete  
Name: SALES, MARIE M MGR  
Address: 6601 NW 23RD WAY  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM ( ) Delete  
Name: RICHIEZ, CHRISTIE  
Address: 6601 NW 23 WAY  
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM ( ) Delete  
Name: VICTORIN, MARIE S  
Address: 2900 NW 42ND AVE, APT. 101A  
City-St-Zip: COCONUT CREEK, FL 33066

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MARIE SALES

MGR

05/01/2009

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