

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000012553

FILED
Jul 14, 2008
Secretary of State

Entity Name: HIS N HAIR'S LLC

Current Principal Place of Business:

1706 E SEMORAN BLVD
109
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

1626 IMPERIAL PALM DRIVE
APOPKA, FL 32712

New Mailing Address:

FEI Number: 20-8363800 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:

VAZAC, FREDA
1626 IMPERIAL PALM DRIVE
APOPKA, FL 32703 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: MGRM () Delete
Name: VAZAC, FREDA
Address: 1626 IMPERIAL PALM DRIVE
City-St-Zip: APOPKA, FL 32712

Title: MGRM () Delete
Name: VAZAC, GEORGE
Address: 1626 IMPERIAL PALM DRIVE
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES:

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: FREDA VAZAC

MGRM

07/14/2008

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