2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 09, 2008
Secretary of State

DOCUMENT# L07000026321

Entity Name: PYRAMIDS SALON "BUILDING HEALTHY HAIR" LLC

Current Principal Place of Business:

810 N NOWELL ST
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

PO BOX 683215
ORLANDO, FL 32868

New Mailing Address:

FEI Number: 16-1723204 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

SIMMONS, CHERYL
7143 BLAIR DR.
ORLANDO, FL 32818 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: SIMMONS, CHERYL
Address: 7143 BLAIR DR.
City-St-Zip: ORLANDO, FL 32818

Title: MGR (X) Delete
Name: SIMMONS, DWANE
Address: 7143 BLAIR DR.
City-St-Zip: ORLANDO, FL 32818

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: CHERYL SIMMONS MGR 09/09/2008

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