

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000068861

Entity Name: HOUSE OF HAIR, L.L.C.

**FILED**  
**Apr 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

269 OLD MOODY BLVD.  
PALM COAST, FL 32164 US

**New Principal Place of Business:**

4 SEPTEMBER PL.  
PALM COAST, FL 32164 US

**Current Mailing Address:**

4 SEPTEMBER PLACE  
PALM COAST, FL 32164 US

**New Mailing Address:**

4 SEPTEMBER PL.  
PALM COAST, FL 32164 US

FEI Number: 26-0703059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANDERS, ANGELA J  
4 SEPTEMBER PLACE  
PALM COAST, FL 32164 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: MGRM  
Name: SANDERS, ANGELA J  
Address: 4 SEPTEMBER PLACE  
City-St-Zip: PALM COAST, FL 32164 US

I hereby 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: ANGELA J. SANDERS

MGRM

04/08/2012

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