

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089162

FILED  
May 15, 2009  
Secretary of State

Entity Name: CATALYST HAIR CARE PRODUCTS, LLC

## Current Principal Place of Business:

2805 VERONIA DR SUITE 204  
PALM BEACH GARDENS, FL 33410 US

## New Principal Place of Business:

8610 ISLEWORTH CT  
304  
RALEIGH, NC 27617 US

## Current Mailing Address:

2805 VERONIA DR SUITE 204  
PALM BEACH GARDENS, FL 33410 US

## New Mailing Address:

8610 ISLEWORTH CT  
304  
RALEIGH, NC 27617 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

OWENS, JOSEPH  
2805 VERONIA DR SUITE 204  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

LIPSCHER, GENE  
824 W. INDIANTOWN RD. SUITE 102.  
JUPITER, FL 33458 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: GENE LIPSCHER

05/15/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: OWENS, JOSEPH  
Address: 2805 VERONIA DR SUITE 204  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: OWENS, JOSEPH  
Address: 8610 ISLEWORTH CT 304  
City-St-Zip: RALEIGH, NC 27617 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: JOE OWENS

MGM

05/15/2009

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