

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127868

Entity Name: XAR HAIR SALON, LLC

FILED  
Mar 30, 2009  
Secretary of State

**Current Principal Place of Business:**

4544 BARRISTER DRIVE  
CLERMONT, FL 34711

**New Principal Place of Business:**

16112 MARSH ROAD  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

4544 BARRISTER DRIVE  
CLERMONT, FL 34711

**New Mailing Address:**

16112 MARSH ROAD  
WINTER GARDEN, FL 34787

FEI Number: 41-2264080

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HENDRY, STONER, CALANDRINO & BROWN, P.A.  
20 N. ORANGE AVENUE, SUITE 600  
ORLANDO, FL 32801 US

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

OVIEDO FINANCIAL SERVICES INC.  
1693 W BROADWAY STREET  
SUITE 3000  
OVIEDO, FL 32765 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: MIRIAM TORRES ACEVEDO

03/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PS ( ) Delete  
Name: GULLO, ALEXANDRA J  
Address: 4544 BARRISTER DRIVE  
City-St-Zip: CLERMONT, FL 34711

Title: VP ( ) Delete  
Name: GULLO, JAMES J  
Address: 4544 BARRISTER DRIVE  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

Title: PS (X) Change ( ) Addition  
Name: GULLO, ALEXANDRA J  
Address: 16112 MARSH ROAD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VP (X) Change ( ) Addition  
Name: GULLO, JAMES J  
Address: 16112 MARSH ROAD  
City-St-Zip: WINTER GARDEN, FL 34787

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: ALEXANDRA J GULLO

PS

03/30/2009

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