2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000015521

Current Principal Place of Business:

ROAM, ELLEN

MGRM

MGRM

4813 GOODRICH AVENUE E

FREUDENBERG, ELIZABETH

BRADENTON, FL 34211

FREUDENBERG, DAVID

BRADENTON, FL 34211

FREUDENBERG, MARKUS

BRADENTON, FL 34211

ALBERQUERE, NM 871101169

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1767 LAKEWOOD RANCH BLVD. #122

1767 LAKEWOOD RANCH BLVD. #122

1767 LAKEWOOD RANCH BLVD. #122

Name:

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City-St-Zip:

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Entity Name: AN AFFAIR WITH HAIR, LLC

FILED Mar 31, 2009 Secretary of State

New Principal Place of Business:

1808 CORTEZ RD WEST #108 BRADENTON, FL 34207 **Current Mailing Address: New Mailing Address:** 1767 LAKEWOOD RANCH BLVD #122 BRADENTON, FL 34211 FEI Number: 26-2146232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FREUDENBERG, PETER THOMAS 1767 LAKEWOOD RANCH BLVD #122 BRADENTON, FL 34211 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete FREUDENBERG, PETER THOMAS Name: Name: 1767 LAKEWOOD RANCH BLVD #122 Address: Address: City-St-Zip: BRADENTON, FL 34211 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition CURLEY, LYNETTE Name: Name: Address: 4813 GOODRICH AVENUE E Address: City-St-Zip: ALBERQUERE, NM 871101169 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Title:

Name:

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

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SIGNATURE: LENORA FREUDENBERG MRS. 03/31/2009