

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000069279

**Entity Name:** DIRECTOR'S CUT HAIR STUDIO LLC

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7448 ALOMA AVE  
UNIT 5  
WINTER PARK, FL 32789

**New Principal Place of Business:**

2740 RETREAT VIEW CIR  
SANFORD, FL 32771

FEI Number: 26-2998146

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMS, CHARITY C  
2740 RETREAT VIEW CIR  
SANFORD, FL 32771 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  
Name: WILLIAMS, CHARITY C  
Address: 2740 RETREAT VIEW CIR  
City-St-Zip: SANFORD, FL 32771

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: CHARITY WILLIAMS

MGR

04/26/2010

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