

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000105504

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** THE ONE BLACK HAIR SCHOOL LLC

**Current Principal Place of Business:**

2004 CLASSIQUE LANE  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

2750 DAVID WALKER DR  
4251  
EUSTIS, FL 32726

**New Mailing Address:**

2291 BRACKNELL FOREST TRL  
TAVARES, FL 32778

**FEI Number:** 80-0355817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALKER, DAWN L  
3510 LAKE CENTER DR  
24203  
MT DORA, FL 32757 US

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

WALKER, DAWN L  
2291 BRACKNELL FOREST TRL  
TAVARES, FL 32778 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:

04/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WALKER, DAWN L  
Address: 2291 BRACKNELL FOREST TRL  
City-St-Zip: TAVARES, FL 32778

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: DAWN WALKER

MGR

04/26/2012

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