

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000017882

**FILED**  
**May 17, 2011**  
**Secretary of State**

**Entity Name:** COLOURWORKS SALON LLC

**Current Principal Place of Business:**

2133 SE. FEDERAL HIGHWAY  
STUART, FL 34994 US

**New Principal Place of Business:**

**Current Mailing Address:**

2133 SE. FEDERAL HIGHWAY  
STUART, FL 34994 US

**New Mailing Address:**

**FEI Number:** 27-2325207

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEAMAN, WALTER SR.  
1798 SE WESTMORELAND BLVD.  
PORT SAINT LUCIE, FL 34952 US

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

FISCHER RASMUSSEN, MELISSA  
1111 SE PRESTON LANE.  
PORT SAINT LUCIE, FL 34983 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: MELISSE FISCHER RASMUSSEN

05/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BURKARD, MARGRET  
Address: 1111 SE PRESTON LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: MGRM  
Name: FISCHER RASMUSSEN, MELISSA  
Address: 1111 SE PRESTON LANE  
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

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: MARGRET BURKARD

MGRM

05/17/2011

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