

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000092104

Entity Name: JANETT HAIR SALON LLC

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8629 U.S. HIGHWAY ONE  
PORT SAINT LUCIE, FL 34952

**New Principal Place of Business:**

8629 S. U.S. HIGHWAY ONE  
PORT SAINT LUCIE, FL 34952

**Current Mailing Address:**

5096 N.W. FIDDLE LEAF COURT  
PORT SAINT LUCIE, FL 34986

**New Mailing Address:**

8629 S. U.S. HIGHWAY ONE  
PORT SAINT LUCIE, FL 34952

FEI Number: 30-0645327

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RANGEL, RICARDO A  
5098 N.W. FIDDLE LEAF COURT  
PORT SAINT LUCIE, FL 34986 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: RANGEL, RICARDO A  
Address: 5098 N.W. FIDDLE LEAF COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: MGRM  
Name: RANGEL, JANETT N  
Address: 5098 N.W. FIDDLE LEAF COURT  
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: RICARDO A. RANGEL

MGR

03/25/2011

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