

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L63744

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Entity Name:** VIVETTE'S ULTIMATE HAIR DESIGNS, INC.

**Current Principal Place of Business:**

2071 N.E. 163RD ST  
N. MIAMI BEACH, FL 33162 US

**New Principal Place of Business:**

**Current Mailing Address:**

2071 N.E. 163RD ST  
N. MIAMI BEACH, FL 33162 US

**New Mailing Address:**

**FEI Number:** 65-0184550

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, VIVETTE  
2071 N.E. 163RD ST  
N. MIAMI BEACH, FL 33162 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: THOMAS, VIVETTE  
Address: 1795 NE 180 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VIVETTE THOMAS

PRES

03/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date