

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L70643

FILED
Apr 30, 2009
Secretary of State

Entity Name: ISELOTTE'S BEAUTY SALON, INC.

Current Principal Place of Business:

4255 C 73RD AVENUE NORTH
UNIT C
PINELLAS PARK, FL 33781 US

New Principal Place of Business:

4930 PARK BOULEVARD
SUITE #5
PINELLAS PARK, FL 33781 US

Current Mailing Address:

4255 C 73RD AVENUE NORTH
UNIT C
PINELLAS PARK, FL 33781 US

New Mailing Address:

1014 WYNDHAM WAY
SAFETY HARBOR, FL 34695 US

FEI Number: 59-3006185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POULARD, ISELOTTE R.
4255 C 73RD AVENUE NORTH
PINELLAS PARK, FL 33781 US

Name and Address of New Registered Agent:

POULARD, ISELOTTE R.
1014 WYNDHAM WAY
SAFETY HARBOR, FL 34695 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: ISELOTTE R. POULARD

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: POULARD, ANDRE L.
Address: 1014 WYNDHAM WAY
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VPS () Delete
Name: POULARD, ISELOTTE R.
Address: 1014 WYNDHAM WAY
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDRE L. POULARD

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04/30/2009

Electronic Signature of Signing Officer or Director

Date