

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M31819

Entity Name: EL GLOBO BEAUTY SALON, INC.

FILED
Mar 31, 2009
Secretary of State

Current Principal Place of Business:

2300 CORAL WAY
SUITE 200
MIAMI, FL 33145 US

New Principal Place of Business:

Current Mailing Address:

2300 CORAL WAY
SUITE 200
MIAMI, FL 33145 US

New Mailing Address:

FEI Number: 59-2673397 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORIDA ANNUAL REPORT SERVICES INC
2300 CORAL WAY
SUITE 200
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LORENZO, JUANA
Address: 2711 SW 15TH ST
City-St-Zip: MIAMI, FL

Title: STD () Delete
Name: BAUZA, JUANA M
Address: 2711 S.W. 15TH STREET
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LORENZO, JUANA
Address: 2711 SW 15TH ST
City-St-Zip: MIAMI, FL 33145 US

Title: STD (X) Change () Addition
Name: BAUZA, JUANA M
Address: 2711 S.W. 15TH STREET
City-St-Zip: MIAMI, FL 33145 US

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: JUANA LORENZO

P

03/31/2009

Electronic Signature of Signing Officer or Director

_____ Date