2004 FOR PROFIT (ORPORATION ANNUAL REPORT

CITY-ST-ZIP

FILED Jan 30, 2004 08:00 AM Secretary of State

1. Entity Nam	MENT # M98407 L & HAIR SALOON, INC.				Secre	tary of	State
Principal Plac 407 W. VINE	e of Business STRFFT	Mailing Address 407 W. VINE STREET					
KISSIMMEE,		KISSIMMEE, FL 34741					
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	and the state of t	arms or manager for a man of the arms on		01262004	No Chg-P	CR2E034 (10/0	3)
	O NOT WRITE	IN THIS SPA	CE	4. FEI Number			Applied For
				59-2908		¢2.75	Not Applicable Additional
	6. Name and Address of Current R	national Appen	<u> </u>	5. Certificate of	Status Desired (Fee Requ	rired
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PERT, LYI 407 W VIN				DO I	NOT WA	ITE	
KISSIMME	E, FL 34741			IN T	HIS SPA	CE	
				, , ,			•
	named entity submits this statement for	the purpose of changing its register	ed office or register	ed agent, or both,	in the State of Florida	. I am familiar w	ith, and accept
the obligat	tions of registered agent.						
Signature speed or printed name of registered agent and tale diapplicable. (NOTE: Registered			ed Agent signature required	when rounstating)	1 SEE AND ASSESSED OF THE PERSON NAMED IN	DATE	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00	9. Election Campalgn Fina Trust Fund Contribution.		.00 May Be led to Fees			
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After Ma	ay 1, 2004 Fee will be \$550.00	Trust Fund Contribution.		.00 May Be ed to Fees	obster a pro-		
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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and triat my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND WPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR