

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000041074

FILED
Feb 01, 2008
Secretary of State

Entity Name: APHRODITE FULL SERVICE SALON, INC.

Current Principal Place of Business:

1232 W. INDIANTOWN ROAD
SUITE 102
JUPITER, FL 33458

New Principal Place of Business:

15790 91TR NORTH
JUPITER, FL 33478

Current Mailing Address:

1232 W. INDIANTOWN ROAD
SUITE 102
JUPITER, FL 33458

New Mailing Address:

15790 91ST TR NORTH
JUPITER, FL 33478

FEI Number: 65-1003718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, DENISE M MANAGER
3204 MORNING GLORY CT
APT 212
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

DIGIOIA, NATALIE N OWNER
15790 91ST TR NORTH
JUPITER, FL 33478 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: NATALIE DIGIOIA

02/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DIGIOIA, NATALIE
Address: 1232 W. INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33458

Title: MGR () Delete
Name: SMITH, DENISE M
Address: 1232 W INDIANTOWN RD SUITE 102
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DIGIOIA, NATALIE
Address: 15790 91ST TR NORTH
City-St-Zip: JUPITER, FL 33478

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: NATALIE DIGIOIA

OWNE

02/01/2008

Electronic Signature of Signing Officer or Director

Date