

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000015473

FILED
May 06, 2009
Secretary of State

Entity Name: JILL'S NATURAL HAIR STUDIO & NAIL, INC.

Current Principal Place of Business:

706 N. MAIN STREET
KISSIMMEE, FL 34741

New Principal Place of Business:

706 N. MAIN STREET
KISSIMMEE, FL 34744

Current Mailing Address:

325 PUFFER COURT
KISSIMMEE, FL 34759

New Mailing Address:

FEI Number: 59-3694086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYVESTER, GILLIAN
325 PUFFER COURT
KISSIMMEE, FL 34759 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

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: P () Delete
Name: SYLVESTER, GILLIAN
Address: 325 PUFFER CT
City-St-Zip: KISSIMMEE, FL 34759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GILLIAN SYLVESTER

OWNE

05/06/2009

Electronic Signature of Signing Officer or Director

Date