

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000019356

FILED
Apr 04, 2005
Secretary of State

Entity Name: ROBERT FRANK SALON, INC.

Current Principal Place of Business:

124 N.E. 2ND STREET
BOCA RATON, FL 33432

New Principal Place of Business:

124 N.E. 2ND STREET
BOCA RATON, FL 33432 US

Current Mailing Address:

124 N.E. 2ND STREET
BOCA RATON, FL 33432

New Mailing Address:

124 N.E. 2ND STREET
BOCA RATON, FL 33432 US

FEI Number: 65-1078484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIONE, SALVATORE F
10877 PINE BARK LANE
BOCA RATON, FL 33428 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: P () Delete
Name: MIONE, SALVATORE
Address: 11074 HIGHLAND CIR.
City-St-Zip: BOCA RATON, FL 33428

Title: VP () Delete
Name: MIONE, ROBERT B
Address: 10877 PINE BARK LANE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MIONE, SALVATORE
Address: 12439 DOGLEG DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: VPD (X) Change () Addition
Name: MIONE, ROBERT B
Address: 10877 PINE BARK LANE
City-St-Zip: BOCA RATON, FL 33428 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SALVATORE F MIONE

PD

04/04/2005

Electronic Signature of Signing Officer or Director

Date