

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000051843

**Entity Name:** THE WASH SALOON, INC.

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

450 W GULF ALTANTIC HWY  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

814 N OLD WIRE  
WILDWOOD, FL 34785

**New Mailing Address:**

**FEI Number:** 59-3720935

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DESANTIS, FRANK  
4188 COUNTY RD. 104  
OXFORD, FL 34484 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

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: DESANTIS, FRANK  
Address: 4188 COUNTY RD. 104  
City-St-Zip: OXFORD, FL 34484

Title: DVS  
Name: DESANTIS, MELISSA  
Address: 4188 COUNTY RD. 104  
City-St-Zip: OXFORD, FL 34484

I hereby 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 all other like empowered.

SIGNATURE: FRANK DESANTIS

PRES

03/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date