## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000056636

Entity Name: SEA BREEZE HAIR SALON, INC.

FILED Apr 30, 2008 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

12771 S.W. 88TH STREET 12771 S.W. 88ST. MIAMI, FL 33186 MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

12771 S.W. 88TH STREET 8660S.W.161AVE. MIAMI, FL 33186 MIAMI, FL 33193

FEI Number: 65-1116509 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

 GONZALEZ, MICHAEL
 GONZALEZ, MICHAEL

 12771 S.W. 88TH STREET
 8660 S.W. 161 AVE.

 MIAMI, FL 33186 US
 MIAMI, FL 33193 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: 04/30/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

() Delete

( ) Delete

() Delete

GONZALEZ, MICHAEL

MIAMI, FL 33186

ESCALONA, BETSY

MIAMI, FL 33186

ESCALONA, JUSTO

GONZALEZ, TÉRESA

MIAMI, FL 33186

MIAMI, FL 33186

12771 S.W. 88TH STREET

12771 S.W. 88TH STREET

12771 S.W. 88TH STREET

12771 S.W. 88TH STREET

## **OFFICERS AND DIRECTORS:**

Title:

Title:

Title:

Title:

Name: Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition

Name: GONZALEZ, MICHAEL

Address: 9660 S W 181 AVE

Address: 8660 S.W. 161 AVE. City-St-Zip: MIAMI, FL 33193

Title: V (X) Change ( ) Addition

Name: ESCALONA, BETSY
Address: 8660 S.W. 161 AVE.
City-St-Zip: MIAMI, FL 33193

Title: ST (X) Change ( ) Addition

Name: ESCALONA, JUSTO Address: 8660 S.W. 161 AVE. City-St-Zip: MIAMI, FL 33193

Title: D (X) Change ( ) Addition

Name: GONZALEZ, TÉRESA Address: 8660 S.W. 161 AVE. City-St-Zip: MIAMI, FL 33193

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: MICHAEL GONZALEZ P 04/30/2008