

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000067657

FILED
Jan 23, 2008
Secretary of State

Entity Name: SUMMIT HAIR RESTORATION, INC.

Current Principal Place of Business:

3023 EASTLAND BLVD., SUITE 113
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

3023 EASTLAND BLVD., SUITE 113
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 59-3740497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRECO, JOSEPH
3023 EASTLAND BLVD., SUITE 113
CLEARWATER, FL 33761 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: D () Delete
Name: GRECO, JOSEPH
Address: 1619 JACANA CT.
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: GRECO, JOSEPH
Address: 3464 HAMILTON AVE
City-St-Zip: SIESTA KEY, FL 34242

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: JOSEPH F. GRECO

DR.

01/23/2008

Electronic Signature of Signing Officer or Director

Date