2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P02000013038

Entity Name: SALON TRELYN, INC.

Current Principal Place of Business:

SALON TRE'LYN
11251 U.S. HWY 1
NORTH PALM BEACH, FL 33048

New Principal Place of Business:

Current Mailing Address:

7701 GEMINATA OAK CT.
PALM BEACH GARDENS, FL 33410

New Mailing Address:

8098 BAUTISTA WAY
PALM BEACH GARDENS, FL 33418

FEI Number: 80-0037568 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CANNOVA, TRACEY ANN
7701 GEMINATA OAK CT.
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

CANNOVA, TRACEY ANN
8098 BAUTISTA WAY
PALM BEACH GARDENS, FL 33418 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: TRACEY ANN CANNOVA 05/01/2006
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: PD ( ) Delete
Name: CANNOVA, TRACEY ANN
Address: 7701 GEMINATA OAK CT.
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VPD ( ) Delete
Name: PORRAS, LINDA ROSE
Address: 3426 GLACIER TERRACE
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CANNOVA, TRACEY ANN
Address: 8098 BAUTISTA WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: TRACEY CANNOVA PD 05/01/2006
Electronic Signature of Signing Officer or Director Date