

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000021878

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Entity Name:** MELA'S HAIR AND BEAUTY INC.

**Current Principal Place of Business:**

1391 LYONS ROAD  
COCONUT CREEK, FL 33063 US

**New Principal Place of Business:**

**Current Mailing Address:**

1391 LYONS ROAD  
COCONUT CREEK, FL 33063 US

**New Mailing Address:**

**FEI Number:** 02-0561269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IBRAGIMOV, OURIEL  
1391 LYONS ROAD  
COCONUT CREEK, FL 33063 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:** OURIEL IBRAGIMOV

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PDTS  
**Name:** IBRAGIMOV, OURIEL  
**Address:** 1391 LYONS ROAD  
**City-St-Zip:** COCONUT CREEK, FL 33063 US

**Title:** VP  
**Name:** KALANTAROV, LUDMILA  
**Address:** 1391 LYONS ROAD  
**City-St-Zip:** COCONUT CREEK, FL 33063 US

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:** OURIEL IBRAGIMOV

P

01/14/2011

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

\_\_\_\_\_  
Date