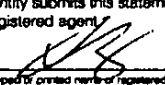
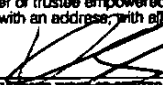


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008 8:00 am
Secretary of State

02-01-2008 90028 004 ***150.00

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DOCUMENT # P02000044915			
1. Entity Name SALON ELYSEE, INC.			
Principal Place of Business 819 N. MILLS AVE. ORLANDO, FL 32803		Mailing Address 819 N. MILLS AVE. ORLANDO, FL 32803	
2. Principal Place of Business - No P.O. Box # 165 SOUTH ORANGE AVE		3. Mailing Address 165 SOUTH ORANGE AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State ORLANDO FL		City & State ORLANDO FL	
Zip 32801	Country USA	Zip 32801	Country USA
4. FEI Number 01-0701933		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent MAK, KAM WAI P 819 N. MILLS AVE. ORLANDO, FL 32803	
7. Name and Address of New Registered Agent Name MAK KAM WAI P Street Address (P.O. Box Number is Not Acceptable) 165 SOUTH ORANGE AVE City ORLANDO FL Zip Code 32801		8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: 		DATE: 1/27/08	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$850.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAK, KAM WAI P 819 N. MILLS AVE. ORLANDO, FL 32803 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	165 South ORANGE AVE ORLANDO FL 32801 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		3/1/08 4078968962	

66002356



01272008 Chg-P CR2E034 (12/06)

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ATTACHMENT

Florida Division of Corporation

66002356

Date : Jan 27, 2008

Dear department

I would like to inform to your department that the business has already relocated in a different location as the information above. Everything will be kept the same but new address only. Please review . Thank you of your service .

Sincerely

Kam wai MAK/ Salon Elysee Inc.

165 S. Orange Ave

Orlando FL 32801

Tel : 407 896 8962