

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000073385

1. Entity Name
SALON SAN MARCO, INC.



Principal Place of Business
2016 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

Mailing Address
2016 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

FILED
Apr 30, 2004 08:00 AM
Secretary of State



02272004 No Chg-P CR2E034 (10/03)

4. FEI Number
50-0004467

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BROOKS, VALERIE R
2016 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

**DO NOT WRITE
IN THIS SPACE**

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

Valerie R. Brooks

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/11/04

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000142170
04/30/04-80040-014 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
LEE, KATHY M
2016 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
BROOKS, VALERIE R
2016 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Valerie R. Brooks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/04 904-398-7428

Date

Daytime Phone #