

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000133003

**Entity Name:** LATINOS HAIR SALON, INC.

**FILED**  
**May 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2105 N DIXIE HWY  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

2561 N DIXIE HWY  
LAKE WORTH, FL 33460

**Current Mailing Address:**

2105 N DIXIE HWY  
LAKE WORTH, FL 33460

**New Mailing Address:**

2561 N DIXIE HWY  
LAKE WORTH, FL 33460

**FEI Number:** 22-3886685

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOMEZ, LEYANIS  
4188 FAITH ST  
WEST PALM BEACH, FL 33406 US

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

GOMEZ, LEYANIS  
1973 PRAIRE ROAD  
WEST PALM BEACH, FL 33406 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: LEYANIS GOMEZ

05/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GOMEZ, LEYANIS  
Address: 1973 PRAIRIE ROAD  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D  
Name: BENAVIDES, BIBIANA M  
Address: 4188 FAITH STREET  
City-St-Zip: WEST PALM BEACH, FL 33406

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: LEYANIS GOMEZ

D

05/10/2012

Electronic Signature of Signing Officer or Director

Date