

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134153

Entity Name: SALON PREMIER, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

933 4TH AVE NORTH
NAPLES, FL 34102

New Principal Place of Business:

1216 WOODRIDGE AVE
NAPLES, FL 34103

Current Mailing Address:

933 4TH AVE NORTH
NAPLES, FL 34102

New Mailing Address:

1216 WOODRIDGE AVE
NAPLES, FL 34103

FEI Number: 37-1451850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEDONE, JOHN
933 4TH AVE NORTH
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

PEDONE, JOHN
1216 WOODRIDGE AVE
NAPLES, FL 34103 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEDONE, JOHN
Address: 1216 WOODRIDGE AVE
City-St-Zip: NAPLES, FL 34103

Title: VP () Delete
Name: PEDONE, CAROL
Address: 1216 WOODRIDGE AVE
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: CAROL PEDONE

VP

04/30/2009

Electronic Signature of Signing Officer or Director

Date