

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021875

Entity Name: MAZZEI HAIR DESIGNERS, INC.

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

5848 SW 73 ST  
MIAMI, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

5848 SW 73 ST  
MIAMI, FL 33143

**New Mailing Address:**

FEI Number: 65-1173826      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MAZZEI, OLGA  
5848 SW 73 ST  
MIAMI, FL 33143 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:

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MAZZEI, OLGA  
Address: 5848 SW 73 STREET  
City-St-Zip: MIAMI, FL 33143

Title: P ( ) Delete  
Name: MAZZEI, CARLO J  
Address: 5848 SW 73 STREET  
City-St-Zip: MIAMI, FL 33143

**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: OLGA MAZZEI

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date