

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023228

FILED  
Jan 05, 2004  
Secretary of State

Entity Name: SENSATIONAL HAIR SALON, INC.

## Current Principal Place of Business:

2096 N. UNIVERSITY DR.  
PEMBROKE PINES, FL 33023

## New Principal Place of Business:

## Current Mailing Address:

2096 N. UNIVERSITY DR.  
PEMBROKE PINES, FL 33023

## New Mailing Address:

FEI Number: 41-2082535

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RODRIGUEZ, MARITZA  
211 NW 77 WAY  
PEMBROKE PINES, FL 33024 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: SERRANO, NANCY  
Address: 1968 NE 123 ST  
City-St-Zip: N MIAMI, FL 33181

Title: D ( ) Delete  
Name: RODRIGUEZ, MARITZA  
Address: 1968 NE 123 ST  
City-St-Zip: N MIAMI, FL 33181

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SERRANO, NANCY  
Address: 2096 N. UNIVERSITY DRIVE  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP (X) Change ( ) Addition  
Name: SERRANO, ALBERT  
Address: 7711 N.W. 6TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33024

I hereby certify that the information supplied with this filing does not qualify for the 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 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: NANCY SERRANO

P

01/05/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date