## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086880

Entity Name: BEAUTY SECRETS FULL SERVICE SALON INC

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

8203 NORTH PINE ISLAND ROAD 6516 FLAGLER STREET

TAMARAC, FL 33321 HOLLYWOOD, FL 33023 US

**Current Mailing Address: New Mailing Address:** 

8203 NORTH PINE ISLAND ROAD 6516 FLAGLER STREET

TAMARAC, FL 33321 HOLLYWOOD, FL 33023 US

FEI Number: 42-1601451 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MALDONADO, CONSUELO ERDMANN, ROSA 8203 NORTH PINE ISLAND RD 6516 FLAGLER STREET HOLLYWOOD, FL 33023 US TAMARAC, FL 33321

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: ROSA ERDMANN 04/27/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition MALDONADO, CONSUELO ERDMANN, ROSA Name: Name:

8203 NORTH PINE ISLAND ROAD 6516 FLAGLER STREET Address: Address: City-St-Zip: TAMARAC, FL 33321 US City-St-Zip: HOLLYWOOD, FL 33023 US

( ) Delete Title: Title: (X) Change ( ) Addition

CRESPO, JANE Name: ERDMANN, ROSA Name: 8203 NORTH PINE ISLAND ROAD 6516 FLAGLER STREET Address: Address: TAMARAC, FL 33321 US HOLLYWOOD, FL 33023 US City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

CRESPO, JANET Name: Name: 8203 N. PINE ISLAND RD. Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33321 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.

Ρ SIGNATURE: ROSA ERDMANN 04/27/2009