2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# P04000046041

Entity Name: SAFARIS FACIAL AND MASSAGE BY DIANE INC.

Current Principal Place of Business:

2636 W. S.R. 434 STE 104
LONGWOOD, FL 32779

New Principal Place of Business:

1060 WEST STATE RD 434
140
LONGWOOD, FL 32750

Current Mailing Address:

2636 W. S.R. 434 STE 104
LONGWOOD, FL 32779

New Mailing Address:

1060 WEST STATE RD 434
140
LONGWOOD, FL 32750

FEI Number: 20-1788472 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TESTANI, DIANE
4956 COURTLAND LOOP
WINTERSPRINGS, FL 32708 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: TESTANI, DIANE
Address: 4956 COURTLAND LOOP
City-St-Zip: WINTERSPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: DIANE TESTANI MRS. 04/07/2009

Electronic Signature of Signing Officer or Director Date