2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 22, 2009
Secretary of State

DOCUMENT# P04000049570

Entity Name: SHARONS BEAUTY SALON INC.

Current Principal Place of Business:

7134 KIMBERLY BLVD
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

1135 SIGMAN ROAD, SUITE C
CONYERS, GA 30012

Current Mailing Address:

1491 ST GEORGE PL
CONYERS, GA 30012

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIVERPOOL, RUTH
4974 N. UNIVERSITY DRIVE
LAUDERHILL, FL 33351 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MCWHINNEY, SHARON
Address: 7134 KIMBERLY BLVD
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: VD ( ) Delete
Name: MCWHINNEY, VINCENT
Address: 7134 KIMBERLY BLVD
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: SHARON MCWHINNEY MRS 05/22/2009

Electronic Signature of Signing Officer or Director Date