## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000114382

Entity Name: R & J HAIR WITH A FLAIR INC.

FILED Mar 02, 2006 Secretary of State

Littly Nai	ille. Kajna	IR WITH A FLAIR INC.				
Current Principal Place of Business:				New Principal Place of Business:		
139 5TH AVENUE INDIALANTIC, FL 32903				139 FIFTH AVENUE INDIALANTIC, FL 32903		
Current Mailing Address:				New Mailing Address:		
139 5TH AVENUE INDIALANTIC, FL 32903				139 FIFTH AVENUE INDIALANTIC, FL 32903		
FEI Number:	: 20-1463297	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SEVERNS, JEAN E 139 5TH AVENUE INDIAIANTIC, FL 32903 US				SEVERNS, JEAN E 139 FIFTH AVENUE INDIALANTIC, FL 32903 US		
	named entity e of Florida.	submits this statement for the	purpose o	f changing i	ts registere	d office or registered agent, or both,
SIGNATURE: JEAN E. SEVERNS  Electronic Signature of Registered Agent				03/02/2006		
				Date		
Election Car		3(2)(b), F.S., the corporation did r g Trust Fund Contribution ( ). TORS:	not receive t	·		ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	SEVERNS, JEA	CREEK PARKWAY #C303		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	VP ( MOCERINO, R 3137 ROB CAY MERRITT ISLA	DRIVE		Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition DENNIS L ES CREEK PARKWAY #C303 SLAND, FL 32952
Title: Name: Address: City-St-Zip:	(	) Delete		Title: Name: Address: City-St-Zip:		() Change (X) Addition SCOTT L DOWLARK LANE ND, IN 46614

I hereby certify that the information supplied with this filing does not qualify for the 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: DENNIS L. SEVERNS VP 03/02/2006