## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000140045

Entity Name: HAIRKARE, INC.

FILED Apr 01, 2007 Secretary of State

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

19402 OTTERS WICK WAY
LAND O LAKES, FL 34639

19402 OTTERS WICK WAY
LAND O LAKES, FL 34638

Current Mailing Address: New Mailing Address:

19402 OTTERS WICK WAY 19402 OTTERS WICK WAY LAND O LAKES, FL 34639 LAND O LAKES, FL 34638

FEI Number: 20-1723854 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MEE, KARALIN L
19402 OTTERS WICK WAY
LAND O LAKES, FL 34639 US

MEE, KARALIN L
19402 OTTERS WICK WAY
LAND O LAKES, FL 34638 US

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: KARALIN L MEE 04/01/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, T ( ) Delete Title: P, T (X) Change ( ) Addition

Name: MEE, KARALIN L Name: MEE, KARALIN L

Address: 19402 OTTERS WICK WAY
City-St-Zip: LAND O LAKES, FL 34639
Address: 19402 OTTERS WICK WAY
City-St-Zip: LAND O LAKES, FL 34638

Name: MEE, JOHN E Name: MEE, JOHN E

 Address:
 19402 OTTERS WICK WAY
 Address:
 19402 OTTERS WICK WAY

 City-St-Zip:
 LAND O LAKES, FL 34639
 City-St-Zip:
 LAND O LAKES, FL 34638

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: JOHN MEE VP 04/01/2007