2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000164355

Entity Name: NEW YORK BARBER SHOP-N-HAIRSTYLING SALON, INC.

FILED Oct 02, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2298 S. MILITARY TRAIL

D

WEST PALM BEACH, FL 33415

Current Mailing Address: New Mailing Address:

2638 GATELY DR. EAST 2298 S. MILITARY TRAIL

WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33415

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

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

BARROSO, JUANA

2638 GATELY DR. EAST

74

VARGAS, CARMELO

447 RAINBOW SPRINGS TERRACE

ROYAL PALM BEACH, FL 33411 U

WEST PALM BEACH, FL 33415 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: CARMELO VARGAS 10/02/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: BARROSO, OSVALDO Name: VARGAS, CARMELO

Address: 2638 GATELY DR. EAST #74 Address: 447 RAINBOW SPRINGS TERRACE City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: ROYAL PALM BEACH, FL 33411

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

Name: BARROSO, JUANA Name: VARGAS, CARMELO

Address: 2638 GATELY DR. EAST #74 Address: 447 RAINBOW SPRINGS TERRACE City-St-Zip: WEST PALM BEACH, FL 33415 City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete Title: D (X) Change () Addition Name: VARGAS, CARMELO Name: VARGAS, CARMELO

Address: 11442 SILK CARNATION WAY Address: 447 RAIMBOW SPRINGS TERRACE
City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ROYAL PALM BEACH, FL 33411

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: CARMELO VARGAS OWNE 10/02/2009