

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000169396

Entity Name: HAIR SOLUTIONS OF TAMPA, INC.

FILED  
Oct 16, 2009  
Secretary of State

## Current Principal Place of Business:

715 S. HOWARD AVE  
TAMPA, FL 33606 US

## New Principal Place of Business:

5010 W. CARMEN ST.  
2020  
TAMPA, FL 33616 US

## Current Mailing Address:

606 S. BLVD  
SUITE 100  
TAMPA, FL 33606 US

## New Mailing Address:

5010 W. CARMEN ST.  
2020  
TAMPA, FL 33616 US

FEI Number: 20-2184691

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FIORE, KEVIN J ESQ.  
1601 FORUM PLACE  
SUITE 701  
WEST PALM BEACH, FL 33401 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: KEVIN J FIORE

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: PS ( ) Delete  
Name: SORBARA, SHANNON  
Address: 2109 BAYSHORE BLVD #605  
City-St-Zip: TAMPA, FL 33606 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change ( ) Addition  
Name: SORBARA, SHANNON  
Address: 2109 BAYSHORE BLVD #605  
City-St-Zip: TAMPA, FL 33606 US

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: SHANNON SORBARA

MS

10/16/2009

Electronic Signature of Signing Officer or Director

Date