2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000019628

Entity Name: 951 NORTH SALONSPA, INC.

FILED Oct 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 15215 COLLIER BLVD. SUITE 316-317 NAPLES, FL 34119 **Current Mailing Address: New Mailing Address:** 1687 TRIANGLE PALM TERRACE NAPLES, FL 34119 FEI Number: 20-2346395 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: MARSICO, MARIA 1687 TRIANGLE PALM TERREACE NAPLES, FL 34119 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: MARIA MARSICO 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: () Delete () Change () Addition MARSICO, MARIA Name: Name: 1687 TRIANGLE PALM TERRACE Address: Address: City-St-Zip: NAPLES, FL 34119 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition BERDUSCO, JOHN P Name: Name: 245 CEDAR DRIVE WEST Address: Address:

HUDSON, WI 54016 City-St-Zip:

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: MARIA MARSICO **PRES** 10/07/2007