2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 17, 2006 8:00 am Secretary of State

Date

Daytime Phone #

DOCUMENT # P05000065885 1. Entity Name STYLIN' SALON, INC.								07-17-2006	90142 ()26 ***15	50.00
Principal Place of Business 4343 MANFIELD DR. VENICE, FL 34293			43	Mailing Address 4343 MANFIELD DR. VENICE, FL 34293							
Principal Place of Business			3. M	3. Mailing Address							
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.			07102006	Chg-P	CR2E	034 (11/05)	
City & State			C	City & State			4. FEI Numbe 20-3	280573	4		pplied For ot Applicable
Zip	Country			Zip Cour		ntry		of Status Desired		\$8.75 Ad Fee Require	ditional ed
	6. Name	and Address of Curren	t Registe				7. Name and	Address of New R	legistered	Agent	
RENAISSANCE TAX & BUSINESS SERVICES, INC.						Name Street Address (P.O. Box Number is Not Acceptable)					
2357-3 S. TAMIAMI TRAIL 201 VENICE, FL 34293						Street Address	E (P.O. Box Numbe	r is Not Acceptable			
VENICE, FL 34293						City			FL	Zip Coo	de
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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
1 DATE											
		! FEE IS \$550.00 otember 6, 2006		9. Election Campa Trust Fund Conf			5.00 May Be idded to Fees				
10. OFFICERS AND				ORS	11.		ADDITIONS/	HANGES TO OFF	ICERS AN	DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY+ST+ZIP	ţ), LOIS NFIELD DRIVE FL 34293		☐ Delete		I				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP				☐ Delete		- 1				Change	Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 mounted to execute a required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter or name attachmental that the property is a property of the corporation of the corporation of the corporation or the receiver or trustee ensured to execute the property of the corporation of the cor											

ATTACHMENT 40099425 STYLIN SALON, INC.

#P8500065785

4343 Manfield Dr., Venice, FI 34293

July 10, 2006

Florida Department Of State Division Of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Re: Corporation Annual Report

To Whom It May Concern:

We received a notice today indicating that our Corporation Annual Report was delinquent. Enclosed is the Annual Report and payment in the amount of \$150.00. We would appreciate your consideration in waiving the penalty in the amount of \$400.00. This is the first notice we received and this being our first year as a Corporation we were not aware of this requirement. Our accountant sold his business in February of this year and therefore we believe he neglected to inform us of the requirement to file by May 1st.

Again we would appreciate your consideration.

Sincerely

Lois Troiano President