

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104729

FILED
Jul 20, 2009
Secretary of State

Entity Name: CHRISTOPHER LUIS HAIR REPLACEMENT, INC.

Current Principal Place of Business:

3356 W HILLSBOURO BLVD
DEERFIELD BCH, FL 33442

New Principal Place of Business:

Current Mailing Address:

3356 W HILLSBOURO BLVD
DEERFIELD BCH, FL 33442

New Mailing Address:

FEI Number: 02-0747071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEJIA, GEMIMA
3356 W HILLSBOURO BLVD
DEERFIELD BCH, FL 33442 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MEJIA, GEMIMA
Address: 5101 MW 1ST AVE
City-St-Zip: FT LAUDERDALE, FL 33309

Title: V () Delete
Name: ORDONEZ, FERNANDO
Address: 5101 NW 1ST AVE
City-St-Zip: FT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: GEMIMA MEJIA

PRES

07/20/2009

Electronic Signature of Signing Officer or Director

Date