2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113428

Entity Name: LESAG HAIR SALON, INC.

FILED Mar 07, 2007 Secretary of State

	ille: LLO/10	TIVITE OF ALOTY, IT VO.			
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
809 FERDINAND ST APT 2 MIAMI, FL 33155			6244 SW 8TH STREE MIAMI, FL 33144	Т	
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
809 FERD APT 2 MIAMI, FL			6244 SW 8TH STREE MIAMI, FL 33144	Т	
FEI Number:	: 20-3315733	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
APT. # 2 MIAMI, FL The above	INAND ST 33134 US	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
Election Car		nic Signature of Registered Aging Trust Fund Contribution ().	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LOPEZ, AXEL	ND ST APTO. 2	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P/D (SUNLEO, VIN 809 FERDINA MIAMI, FL 33	ND ST APT. 2	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: AXEL LOPEZ PD 03/07/2007