

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000120094

Entity Name: MICHAEL'S COUTURE SALON, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

401 WEST MAIN STREET
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

401 WEST MAIN STREET
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 20-3367189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOVERCOOL, NICHOLAS B
2721 SE 35TH STREET
SUMTERVILLE, FL 33585 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

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: P () Delete
Name: SOVERCOOL, KIMBERLY A
Address: 2721 SE 35TH STREET
City-St-Zip: SUMTERVILLE, FL 33585

Title: VP () Delete
Name: GLENN, ROBERT A
Address: 806 PALM AVENUE
City-St-Zip: LEESBURG, FL 34748

Title: S () Delete
Name: GLENN, LONDA
Address: 806 PALM AVENUE
City-St-Zip: LEESBURG, FL 34748

Title: T () Delete
Name: SOVERCOOL, NICHOLAS B
Address: 2721 SE 35TH ST.
City-St-Zip: SUMTERVILLE, FL 33585

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NICHOLAS B. SOVERCOOL

T

05/01/2009

Electronic Signature of Signing Officer or Director

Date