2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000135725

City-St-Zip:

ORLANDO, FL 32825

FILED Apr 09, 2007 Secretary of State

Entity Na	me: HAIR DE	EPOT OF ORLANDO, INC			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
4539 SALVIA DR ORLANDO, FL 32839				1251 W. COLUMBIA AVE. KISSIMMEE, FL 34741	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4539 SALVIA DR ORLANDO, FL 32839			1251 W. COLUMBIA AVE. KISSIMMEE, FL 34741		
FEI Number	: 20-3581937	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:		
The above	VIA DR D, FL 32839 e named entity e of Florida. RE:	US submits this statement for the property of		d office or registered agent, or both, Date	
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (KHADAJ, NAE 4539 SALVIA ORLANDO, FI	DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P (ELKHATIB, RI 4422 FLORA ORLANDO, FI	VISTA DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	P (NASSER, CHA 13227 HEMIN		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: NABIL F KHADAJ Ρ 04/09/2007