2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000136993

CLEARWATER BEACH, FL 33767

City-St-Zip:

Entity Name: ENID SALONS, INC.

FILED May 12, 2008 Secretary of State

Littley Hai	ine. LIND OA	LONO, INO.					
Current Principal Place of Business:				New Principal Place of Business:			
	OR PASSAGE ATER BEACH			12301 83R SEMINOLI	RD AVE E, FL 33772	2	
Current Mailing Address:				New Mailing Address:			
	OR PASSAGE ATER BEACH			12301 83R SEMINOLI	RD AVE E, FL 33772	2	
FEI Number:	: 83-0438727	FEI Number Applied Fo	or() FEI Nu	mber Not App	licable ()	Certific	ate of Status Desired ()
Name and	Address of (Current Registered Ag	jent:	Name and	l Address o	f New Reg	gistered Agent:
4010 BOY TAMPA, FI	DBERT ESQ SCOUT BLVE L 33607 U: named entity e of Florida.	S	for the purpose o	of changing	its registere	d office or	registered agent, or both,
SIGNATUR	RE:						
	Electro	nic Signature of Registe	ered Agent				Date
		3(2)(b), F.S., the corporati g Trust Fund Contribution		the prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	BIRCH, ENID 361 HARBOR) Delete PASSAGE BEACH, FL 33767		Title: Name: Address: City-St-Zip:		() Change	() Addition
Title: Name: Address:	VD (BIRCH, ALAN 361 HARBOR I) Delete PASSAGE		Title: Name: Address:	VD BIRCH, ALA 12301 83RE		() Addition

SEMINOLE, FL 33772

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: ALAN BIRCH VP 05/12/2008