2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AN
Secretary of State

	ANNUAL REI	ruk i
DOCUMENT	# P06000021050	-
1. Entity Name		

Principal Place of Business

LATINOS BEAUTY SALON, INC.

Mailing Address

445 10TH AVENUE WEST PALMETTTO, FL 34221

445 10TH AVENUE WEST PALMETTTO, FL 34221



CR2E034 (11/05)

Daytime Phone #

DO NOT WRITE IN THIS SPACE

4. FEI Number	 Applied For
20-4308974	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional

6. Name and Address of Current Registered Agent

ADAN, LORENZO 445 10TH AVENUE WEST PALMETTO, FL 34221

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

02292008

8. 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 I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and kills if applicable (NOTE Registered Agent signature required when reinstating) DATE						
	Signature, typed or printed name of registered agent and little	Lapplicable (NOTE Registered	Agent signature	required when reinstaling)	· DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	 Election Campaign Finan Trust Fund Contribution. 	cing	\$5.00 May Be Added to Fees	U00000941691 05/28/08-80114-018 150.00	
10.	OFFICERS AND DIREC	TORS		•		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ADAN, JUAN 445 10TH AVENUE WEST PALMETTO, FL 34221					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CHY-S1-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					and the second of the second o	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						