

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000023058

Entity Name: ALEX DAY SPA AND SALON, INC.

FILED
Aug 27, 2009
Secretary of State

Current Principal Place of Business:

4452 WESTON ROAD
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

4452 WESTON ROAD
WESTON, FL 33331

New Mailing Address:

FEI Number: 20-4324905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOHAMMED, LISA S
6501 NW 51 STREET
LAUDERHILL, FL 33319 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PERSAD, ROBIN
Address: 6501 NW 51 STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: PERSAD, ALEXANDRIA K MS.
Address: 6501 NW 51 STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: P () Delete
Name: MOHAMMED, LISA S
Address: 6501 NW 51 STREET
City-St-Zip: LAUDERHILL, FL 33319

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: PERSAD, BOLAI J
Address: 6501 NW 51 STREET
City-St-Zip: LAUDERHILL, FL 33319

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: LISA MOHAMMED

P

08/27/2009

Electronic Signature of Signing Officer or Director

Date