

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000033445

Entity Name: RETREAT SALON, SPA, BOUTIQUE, INC.

FILED
Oct 23, 2008
Secretary of State

Current Principal Place of Business:

2519 MCMULLEN BOOTH RD
#204
CLEARWATER, FL 33761 US

New Principal Place of Business:

Current Mailing Address:

2519 MCMULLEN BOOTH RD
#204
CLEARWATER, FL 33761 US

New Mailing Address:

FEI Number: 20-4793246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HUGHES, LORI
2519 MCMULLEN BOOTH RD
#204
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

LUGINSKI, DAVID
2519 MCMULLEN BOOTH RD
#204
CLEARWATER, FL 33761 US

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: DAVID LUGINSKI

10/23/2008

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: PVST () Delete
Name: HUGHES, LORI
Address: 2519 MCMULLEN BOOTH RD #204
City-St-Zip: CLEARWATER, FL 33761 US

Title: D () Delete
Name: HUGHES, LORI
Address: 2519 MCMULLEN BOOTH RD #204
City-St-Zip: CLEARWATER, FL 33761 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: LUGINSKI, DAVID
Address: 2519 MCMULLEN BOOTH RD #204
City-St-Zip: CLEARWATER, FL 33761 US

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: DAVID LUGINSKI

PVST

10/23/2008

Electronic Signature of Signing Officer or Director

Date