

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036311

Entity Name: SALON OASIS, INC.

FILED  
Apr 13, 2007  
Secretary of State

## Current Principal Place of Business:

143 NE 2ND AVENUE  
DEERFIELD BEACH, FL 33441

## New Principal Place of Business:

## Current Mailing Address:

143 NE 2ND AVENUE  
DEERFIELD BEACH, FL 33441

## New Mailing Address:

FEI Number: 02-0772349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

REID'S INCOME TAX & COMPUTER SERVICE, LLC  
5419 NORTH STATE ROAD 7  
TAMARAC, FL 33319 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: WARREN D REID

04/13/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: SEWELL, CYNTHIA  
Address: 143 NE 2ND AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VSD ( ) Delete  
Name: CLOUGH, MAUREEN  
Address: 143 NE 2ND AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: CLOUGH, MAUREEN  
Address: 143 NE 2ND AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VSD (X) Change ( ) Addition  
Name: JEFFREY, MARLON  
Address: 158 NW 15TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

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.

SIGNATURE: MAUREEN CLOUGH

PTD

04/13/2007

Electronic Signature of Signing Officer or Director

Date