2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2007 SEP -5 PM 12:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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8/9/07 90053 014 150.00
08292007 Chg-P CR2E034 (12/06)

DOCUMENT # P06000063699

1. Entity Name
SALON EUPHORIA, INC.

Principal Place of Business	Mailing Address
1422 SW 109TH WAY DAVIE, FL 33324 US	1422 SW 109TH WAY DAVIE, FL 33324 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5755 S University Dr	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Davie FL	City & State
Zip: 33328 Country: USA	Zip Country

4. FEI Number: 20-4869823 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HUDGENS, MELANIE D 1422 SW 109TH WAY DAVIE, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THARP, THERESA K 2843 SW 85TH AVE MIRAMAR, FL 33025	☐ Delete	TITLE D NAME Tharp, Theresa K STREET ADDRESS 9890 NW 10 St CITY-ST-ZIP Pembroke Pines FL 33024	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUDGENS, MELANIE D 1422 SW 109TH WAY DAVIE, FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP,T THARP, THERESA K 2843 SW 85TH AVE MIRAMAR, FL 33025	☐ Delete	TITLE VP,T NAME Tharp, Theresa K STREET ADDRESS 9890 NW 10 St CITY-ST-ZIP Pembroke Pines FL 33024	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P,S HUDGENS, MELANIE D 1422 SW 109TH WAY DAVIE, FL 33324	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition

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.

SIGNATURE: TH Tharp 8/28/07 9541680 7522
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

9/5 aw