

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077844

FILED  
Feb 18, 2010  
Secretary of State

Entity Name: SALON THERAPY INC.

**Current Principal Place of Business:**

2522 N. MCMULLEN BOOTH RD C  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

2522 N. MCMULLEN BOOTH RD C  
CLEARWATER, FL 33761

**New Mailing Address:**

FEI Number: 20-5039608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VIVIANO, ERICA R  
1465 OAK HILL DR # 103  
DUNEDIN, FL 34698 US

**Name and Address of New Registered Agent:**

VIVIANO, ERICA R  
1799 EAGLE RIDGE BLVD.  
PALM HARBOR, FL 34685 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/18/2010

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSTV  
Name: VIVIANO, ERICA  
Address: 2522 N. MCMULLEN BOOTH RD. C  
City-St-Zip: CLEARWATER, FL 33761

Title: D  
Name: VIVIANO, ERICA  
Address: 2522 N. MCMULLEN BOOTH RD. C  
City-St-Zip: CLEARWATER, FL 33761

I hereby 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 all other like empowered.

SIGNATURE: ERICA VIVIANO

Electronic Signature of Signing Officer or Director

PRES

02/18/2010

Date