2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2009
Secretary of State

DOCUMENT# P06000088302

Entity Name: A & S BEAUTY SALON, INC.

Current Principal Place of Business:

6817 JOHNSON STREET
HOLLYWOOD, FL 33024 US

New Principal Place of Business:

Current Mailing Address:

6817 JOHNSON STREET
HOLLYWOOD, FL 33024 US

New Mailing Address:

FEI Number: 20-5141349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANTOS, AURA
6817 JOHNSON STREET
HOLLYWOOD, FL 33024 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SANTOS, AURA
Address: 1431 NORTH 71ST TERRACE
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: D ( ) Delete
Name: SANTOS, JOSE
Address: 1431 NORTH 71ST TERRACE
City-St-Zip: HOLLYWOOD, FL 33024 US

Title: D ( ) Delete
Name: REYES, SANTA
Address: 7901 NW 3 STREET BUILDING # 21 APT # 202
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S ( ) Delete
Name: SANTOS, BERIDIANA
Address: 1431 NORTH 71ST TERRACE
City-St-Zip: HOLLYWOOD, FL 33024 US

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: ( ) 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: AURA SANTOS P 02/09/2009

Electronic Signature of Signing Officer or Director Date