

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000117990

Entity Name: HEADLINES SALON AND SPA, INC

FILED  
Jan 05, 2009  
Secretary of State

## Current Principal Place of Business:

44 LAWTON AVE.  
OVIEDO, FL 32765

## New Principal Place of Business:

## Current Mailing Address:

44 LAWTON AVE.  
OVIEDO, FL 32765

## New Mailing Address:

FEI Number: 20-5531905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ODEN, PHYLLIS Y  
251 LYNN ST  
OVIEDO, FL 32765 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: PHYLLIS Y ODEN

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: P ( ) Delete  
Name: ODEN, PHYLLIS Y  
Address: 251 LYNN ST  
City-St-Zip: OVIEDO, FL 32765

Title: VP ( ) Delete  
Name: CRUZ, LISSETTE M  
Address: 3262 DELBROOK DR  
City-St-Zip: DELTONA, FL 32738

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: CRUZ, LISSETTE M  
Address: 4030 NEW BROAD CIRCLE  
City-St-Zip: OVIEDO, FL 32765

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: LISSETT M. CRUZ

VP

01/05/2009

Electronic Signature of Signing Officer or Director

Date