

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121535

FILED  
Aug 25, 2009  
Secretary of State

Entity Name: KAMRAN'S HAIR CONCEPTS INC.

**Current Principal Place of Business:**

1185 SPRING CENTER SOUTH BLVD.  
1080  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

1185 SPRING CENTER SOUTH BLVD.  
1080  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

FEI Number: 59-3283923

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAHRAMI, KAMRAN  
1185 SPRING CENTER SOUTH BLVD.  
1080  
ALTAMONTE SPRINGS, FL 32714 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

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: BAHRAMI, KAMRAN  
Address: 1185 SPRING CENTER SOUTH BLVD.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: VP ( ) Delete  
Name: BAHRAMI, MANIJEH  
Address: 1185 SPRING CENTER SOUTH BLVD.  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: KAMRAN BAHRAMI

PRES

08/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date