

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000130216

FILED
Apr 14, 2009
Secretary of State

Entity Name: AMBER NICOLE'S HOUSE OF HAIR, INC.

Current Principal Place of Business:

26545 CHIMNEY SPIRE LANE
WESLEY CHAPEL, FL 33543 US

New Principal Place of Business:

26545 CHIMNEY SPIRE LANE
WESLEY CHAPEL, FL 33544 US

Current Mailing Address:

P.O. BOX 7757
WESLEY CHAPEL, FL 33544 US

New Mailing Address:

P.O. BOX 7757
WESLEY CHAPEL, FL 33545 US

FEI Number: 20-5775033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSSITER, AMBER
26545 CHIMNEY SPIRE LANE
WESLEY CHAPEL, FL 33543 US

Name and Address of New Registered Agent:

ROSSITER, AMBER
26545 CHIMNEY SPIRE LANE
WESLEY CHAPEL, FL 33544 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:

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSSITER, AMBER
Address: P.O. BOX 7757
City-St-Zip: WESLEY CHAPEL, FL 33544 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROSSITER, AMBER
Address: P.O. BOX 7757
City-St-Zip: WESLEY CHAPEL, FL 33545 US

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: AMBER ROSSITER

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date