

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000153628

FILED  
Oct 28, 2007  
Secretary of State

Entity Name: ALL ABOUT YOU HAIR & MASSAGE THERAPY, INC.

## Current Principal Place of Business:

935 RIDGEWOOD AVE.  
HOLLY HILL, FL 32117

## New Principal Place of Business:

4011 S NOVA RD  
B  
PORT ORANGE, FL 32127 US

## Current Mailing Address:

935 RIDGEWOOD AVE.  
HOLLY HILL, FL 32117

## New Mailing Address:

4011 S NOVA RD  
B  
PORT ORANGE, FL 32127 US

FEI Number: 20-8319417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HEDIN, JEAN M  
3003 S ATLANTIC AVENUE  
6A2  
DAYTONA BEACH, FL 32118 US

## Name and Address of New Registered Agent:

DEMATOS, DAWN M  
242 ORCHARD ST  
4  
PORT ORANGE, FL 32127 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: DAWN M DEMATOS

10/28/2007

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: DEMATOS, DAWN M  
Address: PO BOX 2069  
City-St-Zip: DAYTONA BEACH, FL 32115

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition  
Name: DEMATOS, ROSILID J  
Address: 38 WATUPPA RD  
City-St-Zip: WESTPORT, MA 02790

Title: VP ( ) Change (X) Addition  
Name: DEMATOS, ALVARO J  
Address: 38 WATUPPA RD  
City-St-Zip: WESTPORT, MA 02790

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: DAWN M DEMATOS

P

10/28/2007

Electronic Signature of Signing Officer or Director

Date