

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024538

FILED
Feb 25, 2009
Secretary of State

Entity Name: HAIR PERFORMER OF FORT LAUDERDALE, INC.

Current Principal Place of Business:

760 NW 36TH STREET
OAKLAND PARK, FL 33309

New Principal Place of Business:

4448 NW 92 WAY
SUNRISE, FL 33351

Current Mailing Address:

760 NW 36TH STREET
OAKLAND PARK, FL 33309

New Mailing Address:

4448 NW 92 WAY
SUNRISE, FL 33351

FEI Number: 71-1029395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARENTI, MARY
760 NW 36TH STREET
OAKLAND PARK, FL 33309 US

Name and Address of New Registered Agent:

PARENTI, MARY
4448 NW 92 WAY
SUNRISE, FL 33351 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: MARY PARENTI

02/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PARENTI, MARY
Address: 760 NW 36TH STREET
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PARENTI, MARY
Address: 4448 NW 92 WAY
City-St-Zip: SUNRISE, FL 33351

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: MARY PARENTI

D

02/25/2009

Electronic Signature of Signing Officer or Director

Date