

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035842

FILED
Apr 16, 2009
Secretary of State

Entity Name: YSIDORA BEAUTY SALON UNISEX INC.

Current Principal Place of Business:

855 SKY LAKE CIR.
SUITE D
ORLANDO, FL 32809

New Principal Place of Business:

900 W LANCASTER RD
11
ORLANDO, FL 32809

Current Mailing Address:

855 SKY LAKE CIR.
SUITE D
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 20-5608597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOMEZ, MIGUEL A
845 SKY LAKE CIR.
SUITE D
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

GOMEZ, MIGUEL A
855 SKY LAKE CIR.
SUITE D
ORLANDO, FL 32809 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:

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOMEZ, MIGUEL A
Address: 855 SKY LAKE CIR.
City-St-Zip: ORLANDO, FL 32809

Title: V () Delete
Name: GOMEZ, CECILIA M
Address: 855 SKY LAKE CIR.
City-St-Zip: ORLANDO, FL 32809

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: MIGUEL GOMEZ

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date