2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 10, 2008 8:00 am
Secretary of State
05-08-2008 90019 031 ***150.00

DOCUMENT # P07000094579

1. Entity Name

FIFI, INC.

66013814

Principal Place of Business	Mailing Address
341 SW 68 AVE MARGATE FL 33068	341 SW 68 AVE MARGATE FL 33068

1st MOORE CR2E034 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
BELLI-CAPELLI-SALON	341-SW. 68 AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State TAMARAC	City & State FLO
Zip 33321 Country Broward	Zip Country

4. FEI Number ID "26-0754294 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name ANNA - CATANIA Street Address (P.O. Box Number is Not Acceptable) 341-SW. 68 AVE City Margate - FLO 33068 FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Anna Catania 6-5-08 DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CATANIA, ANNA 341 SW 68 AVE MARGATE FL 33068	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anna Catania ANNA CATANIA 4/19/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #