

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000095214

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: BOULIN BEAUTY SALON, INC.

## Current Principal Place of Business:

375 NE 54TH STREET  
MIAMI, FL 33137

## New Principal Place of Business:

375 NE 54TH STREET  
4  
MIAMI, FL 33137

## Current Mailing Address:

375 NE 54TH STREET  
MIAMI, FL 33137

## New Mailing Address:

375 NE 54TH STREET  
4  
MIAMI, FL 33137

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOUIS, MIDRESE P  
1130 NE 113TH STREET  
MIAMI, FL 33161 US

## Name and Address of New Registered Agent:

PIERRE-LOUIS, MIDRESE  
375 NE 54TH STREET  
4  
MIAMI, FL 33137 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: MIDRESE PIERRE-LOUIS

03/30/2009

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: LOUIS, MIDRESE P  
Address: 1130 NE 113TH STREET  
City-St-Zip: MIAMI, FL 33161

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PIERRE-LOUIS, MIDRESE  
Address: 1130 NE 113TH STREET  
City-St-Zip: MIAMI, FL 33161

Title: D ( ) Change (X) Addition  
Name: GABRIELLA, JEAN  
Address: 375 NE 54TH STREET # 4  
City-St-Zip: MIAMI, FL 33137 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: MIDRESE PIERRE-LOUIS

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date