

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000101193

Entity Name: EL LAUREL BARBER SHOP CORP

FILED
Jan 04, 2008
Secretary of State

Current Principal Place of Business:

11050 SW 196 ST
APT 211
MIAMI, FL 33157

New Principal Place of Business:

6158 SW SR 200
SUITE 105
OCALA, FL 34476

Current Mailing Address:

11050 SW 196 ST
APT 211
MIAMI, FL 33157

New Mailing Address:

P.O. BOX 770843
OCALA, FL 33477

FEI Number: 37-1549648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALEMAN, LUIS ASNIEL
11050 SW 196 ST
APT 211
MIAMI, FL 33157 US

Name and Address of New Registered Agent:

ALEMAN, LUIS ASNIEL
6158 SW SR 200
SUITE 105
OCALA, FL 34476 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:

01/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALEMAN, LUIS ASNIEL
Address: 11050 SW 196 ST, APT 211
City-St-Zip: MIAMI, FL 33157

Title: VPD () Delete
Name: ALEMAN, MARYOLEN
Address: 11050 SW 196 ST, APT 211
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALEMAN, LUIS ASNIEL
Address: 6158 SW SR 200 SUITE 105
City-St-Zip: OCALA, FL 34476

Title: VPD (X) Change () Addition
Name: ALEMAN, MARYOLEN
Address: 6158 SW SR 200 SUITE 105
City-St-Zip: OCALA, FL 34476

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: LUIS A ALEMAN

PD

01/04/2008

Electronic Signature of Signing Officer or Director

Date