## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000108828

Entity Name: DANN'S BEAUTY SALON, INC.

FILED Apr 28, 2009 Secretary of State

Current I	Principal Place of Business:	New Principal Place of Business:	
	DIXIE HWY,		
SUITE NO LAKE WO	DRTH, FL 33460		
Current I	Mailing Address:	New Mailing Address:	
SUITE NO	DIXIE HWY, D. 5 DRTH, FL 33460		
	er: 26-1162370 FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desire	d()
Name an	d Address of Current Registered Ager	nt: Name and Address of New Registered Agent:	
546 18TH	NDO, GLORIA F I ST ALM BEACH, FL 33407 US		
	e named entity submits this statement for te of Florida.	the purpose of changing its registered office or registered agent,	or both,
	te of Florida.	the purpose of changing its registered office or registered agent,	or both,
in the Sta	te of Florida.		or both,
in the Sta SIGNATL	te of Florida.	d Agent Date	or both,
in the Sta SIGNATL Election Ca	te of Florida.  JRE:  Electronic Signature of Registere	d Agent Date	
in the Sta SIGNATU Election Ca	te of Florida.  JRE:  Electronic Signature of Registere  ampaign Financing Trust Fund Contribution ( )  RS AND DIRECTORS:  P ( ) Delete	d Agent Date  Date  ADDITIONS/CHANGES TO OFFICERS AND DIF	
in the Sta SIGNATL Election Ca OFFICEF Title: Name:	te of Florida.  JRE:  Electronic Signature of Registere  ampaign Financing Trust Fund Contribution ( )  RS AND DIRECTORS:  P ( ) Delete  CUADRADO, GLORIA F	d Agent Date  Date  ADDITIONS/CHANGES TO OFFICERS AND DIF  Title: ( ) Change ( ) Addition  Name:	
in the Sta SIGNATL Election Ca OFFICEF Title: Name: Address:	te of Florida.  JRE:  Electronic Signature of Registere  ampaign Financing Trust Fund Contribution ( )  RS AND DIRECTORS:  P ( ) Delete  CUADRADO, GLORIA F  546 18TH ST	d Agent Date  Date  Date  ADDITIONS/CHANGES TO OFFICERS AND DIF  Title: ( ) Change ( ) Addition  Name:  Address:	
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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: GLORIA F HURTADO P 04/28/2009