

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000112197

Entity Name: MAGNOLIA SALON, INC.

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

11300 LEGACY AVENUE  
BUILDING J, SUITE 200  
PALM BEACH GARDENS, FL 33410 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

305 BALSAM STREET  
PALM BEACH GARDENS, FL 33410 US

## **New Mailing Address:**

FEI Number: 26-1223125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ANGELO, ANNE R  
305 BALSAM STREET  
PALM BEACH GARDENS, FL 33410 US

## **Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: PST  
Name: ANGELO, ANNE R  
Address: 305 BALSAM STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

Title: VP  
Name: ANGELO, CHRISTOPHER  
Address: 305 BALSAM STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

I hereby 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 all other like empowered.

SIGNATURE: ANNE ANGELO

PST

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date