2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000119420

Address:

City-St-Zip:

2920 SW 139 AVE.

MIAMI, FL 33175 US

Entity Name: IRIS & CARLOS BEAUTY SALON, INC.

FILED Nov 20, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
233 ARAG CORAL GA	ON AVE. ABLES, FL 33134	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
233 ARAG CORAL G	ON AVE. ABLES, FL 33134	US			
FEI Number:	: 26-1347372 FE	Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ORTEGA, 2920 SW 1 MIAMI, FL					
	named entity subm e of Florida.	its this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE: CARLOS ORT	EGA			
	Electronic Si	gnature of Registered Age	ent	Date	
	, ,,), F.S., the corporation did no	t receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delet ORTEGA, CARLOS A 2920 SW 139 AVE. MIAMI, FL 33175 US	JR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () Delet VICTORES, IRIS 2951 SW 139 AVE. MIAMI, FL 33175 US		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () Delet ORTEGA, CARLOS A 2951 SW 139 AVE. MIAMI, FL 33175 US	SR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	P () Delet		Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CARLOS ORTEGA PRES 11/20/2008