

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000131450

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: NELSY BEAUTY SALON, CORP

## Current Principal Place of Business:

1545 NW 119ST  
NORTH MIAMI, FL 33168

## New Principal Place of Business:

15006 NW 7 AVE  
NORTH MIAMI BEACH, FL 33168

## Current Mailing Address:

545 NW 129ST  
NORTH MIAMI, FL 33168

## New Mailing Address:

FEI Number: 26-1561117      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RODRIGUEZ, ENELCIDA  
545 NW 129 ST  
NORTH MIAMI, FL 33168      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: P ( ) Delete  
Name: RODRIGUEZ, ENELCIDA  
Address: 545 NW 129 ST  
City-St-Zip: NORTH MIAMI, FL 33168

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ENELSIDA RODRIGUEZ

P

04/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date