

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050716

Entity Name: STAR HAIRCUTS INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

995 WEST ORANGE BLOSSOM TRAIL
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

1288 ERROL PARKWAY
APOPKA, FL 32712 US

New Mailing Address:

995 WEST ORANGE BLOSSOM TRAIL
APOPKA, FL 32712 US

FEI Number: 26-2719087

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINGH, CHANDRADAT K
1288 ERROL PARKWAY
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

SINGH, CHANDRADAT K
995 WEST ORANGE BLOSSOM TRAIL
APOPKA, FL 32712 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: AGBON-TAEN

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SINGH, CHANDRADAT K
Address: 1288 ERROL PARKWAY
City-St-Zip: APOPKA, FL 32712 US

Title: VP () Delete
Name: SINGH, MELANIE T
Address: 1288 ERROL PARKWAY
City-St-Zip: APOPKA, FL 32712 US

Title: S (X) Delete
Name: HARRIPAUL, BHAWASE C
Address: 1288 ERROL PARKWAY
City-St-Zip: APOPKA, FL 32712 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GWEND, AGBON-TAEN
Address: 995 WEST ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32712 US

Title: VP (X) Change () Addition
Name: VINCE, AGBON-TAEN
Address: 995 WEST ORANGE BLOSSOM TRAIL
City-St-Zip: APOPKA, FL 32712 US

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: GWENDOLYN AGBON-TAEN

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date