2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000055823

Entity Name: IDENTITY HAIR & NAILS, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2752 S.W. BRIGANTINE PLACE PORT ST. LUCIE, FL 34953				10630 S.W. VILLAGE GREEN DR PORT ST. LUCIE, FL 34987	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	NEWPORT I LUCIE, FL 34	SLAND BLVD. 4953			
FEI Number:	26-2815294	FEI 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:					
	I, TINA NEWPORT IS LUCIE, FL 34				
	named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS	S AND DIREC	CTORS:	ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	P (BEHESHTI, TII) Delete NA	Title: Name:	() Change () Addition	

 Name:
 BEHESHTI, TINA
 Name:
 Address:
 2226 SW NEWPORT IS BLVD.
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34953
 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: TINA BEHESHTI PRES 04/29/2009