## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000063660

Entity Name: ALL ABOUT HER, INC.

PACE, FL 32571 US

City-St-Zip:

FILED Apr 13, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4495 CHUMUCKLA HWY. PACE, FL 32571 US **Current Mailing Address: New Mailing Address:** 3605 MISTY WOODS CIRCLE PACE, FL 32571 US FEI Number: 26-2915987 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: SIMMONS, HOLLY M 3605 MISTY WOODS CIRCLE PACE, FL 32571 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SIMMONS, HOLLY M Name: Name: 3605 MISTY WOODS CIRCLE Address: Address: City-St-Zip: PACE,, FL 32571 US City-St-Zip: Title: (X) Delete Title: () Change () Addition SIMMONS, MICHAEL W Name: Name: 3605 MISTY WOODS CIRCLE Address: 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: HOLLY SIMMONS P 04/13/2009