

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000042981

**FILED**  
**Mar 24, 2010**  
**Secretary of State**

**Entity Name:** D' CACHE BEAUTY SHOP INC.

**Current Principal Place of Business:**

107 E. MONUMENT AVE.  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

107 E. MONUMENT AVE.  
KISSIMMEE, FL 34741

**Current Mailing Address:**

107 E. MONUMENT AVE.  
KISSIMMEE, FL 34744

**New Mailing Address:**

107 E. MONUMENT AVE.  
KISSIMMEE, FL 34741

**FEI Number:** 26-4816306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COHEN, ALEXANDRA M  
3102 WESTBROOK DR  
KISSIMMEE, FL 34746 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  
Name: COHEN, ALEXANDRA M  
Address: 3102 WESTBROOK DR  
City-St-Zip: KISSIMMEE, FL 34746

I hereby 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 all other like empowered.

SIGNATURE: ALEXANDRA M COHEN

MS

03/24/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date