

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000043925

**FILED**  
**Apr 20, 2010**  
**Secretary of State**

**Entity Name:** ALL TEASED UP BEAUTY BOUTIQUE, INC.

**Current Principal Place of Business:**

1500 S. US HWY 27  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

1500 S. US HWY 27  
CLERMONT, FL 34711

**New Mailing Address:**

**FEI Number:** 27-1782662

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAGLEY, ASHLEY  
16320 JOHNS LAKE RD  
CLERMONT, FL 34711 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: BAGLEY, ASHLEY  
Address: 1500 S. US HWY 27  
City-St-Zip: CLERMONT, FL 34711

Title: V  
Name: MIXON, JENNY  
Address: 12435 FRIENDSHIP RD  
City-St-Zip: CLERMONT, FL 34711

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:** JENNY MIXON

V

04/20/2010

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

\_\_\_\_\_  
Date