

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000045710

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** GEISHA HAIR INC.

**Current Principal Place of Business:**

1005 S CONGRESS AVE SUITE 102  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

124 NE 2ND STREET  
ROBERT FRANK SALON - MIZNER PLAZA  
BOCA RATON, FL 33432

**Current Mailing Address:**

1005 S CONGRESS AVE SUITE 102  
DELRAY BEACH, FL 33445

**New Mailing Address:**

1537 MEADOWS CIRCLE W  
BOYNTON BEACH, FL 33436

**FEI Number:** 27-0190723

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWMAN, TONYA R PSD  
1537 MEADOWS CIRCLE W  
BOYNTON BEACH, FL 33436 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

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: NEWMAN, TONYA R PSD  
Address: 1537 MEADOWS CIRCLE W  
City-St-Zip: BOYNTON BEACH, FL 33436

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: TONYA R. NEWMAN

PSD

04/30/2012

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

\_\_\_\_\_  
Date