

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000081987

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** CARMICHAELS HAIR STUDIO 1 INC.

**Current Principal Place of Business:**

4620 FOX HUNT DR  
TAMPA, FL 33624

**New Principal Place of Business:**

15241 N DALE MABRY HWY  
TAMPA, FL 33618

**Current Mailing Address:**

4620 FOX HUNT DR  
TAMPA, FL 33624

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD, SUITE 101  
TALLAHASSEE, FL 32301      US

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

CARLOS, GONZALEZ VP  
4620 FOX HUNT DRIVE  
TAMPA, FL 33624      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: CARLOS GONZALEZ

03/18/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DVP  
Name: POWELL, MICHAEL  
Address: 4620 FOX HUNT DR  
City-St-Zip: TAMPA, FL 33624

Title: D/T  
Name: GONZALEZ, CARLOS  
Address: 4620 FOX HUNT DR  
City-St-Zip: TAMPA, FL 33624

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: CARLOS GONZALEZ

VP

03/18/2010

Electronic Signature of Signing Officer or Director

Date