## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P10000041885

Entity Name: INNOVATION GALLERY SALON & SPA, INC

Apr 02, 2011 Secretary of State

04/02/2011

**Current Principal Place of Business: New Principal Place of Business:** 

12824 BOGGY POINTE DR 1790 WEST SAND LAKE ROAD, B136 ORLANDO, FL 32824

ORLANDO, FL 32809

**Current Mailing Address: New Mailing Address:** 

12824 BOGGY POINTE DR 1790 WEST SAND LAKE ROAD, B136

ORLANDO, FL 32809 ORLANDO, FL 32824

FEI Number: 27-2683080 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:

GONZALEZ, RUBEN CHAVEZ, SILVIA

1790 WEST SAND LAKE ROAD, SUITE B136 12824 BOGGY POINTE DR

ORLANDO, FL 32824 ORLANDO, FL 32809 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: SILVIA CHAVEZ

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: CHAVEZ, SILVIA

1790 WEST SAND LAKE ROAD, SUITE B136 Address:

City-St-Zip: ORLANDO, FL 32809

Title: VΡ

Name: CLARO, CRISTOBAL

1790 WEST SAND LAKE ROAD, SUITE B136 Address:

ORLANDO, FL 32809 City-St-Zip:

Title:

MACIAS, NEPTALI G Name:

1790 WEST SAND LAKE ROAD, SUITE B136 Address:

City-St-Zip: ORLANDO, FL 32809

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.

Ρ SIGNATURE: SILVIA CHAVEZ 04/02/2011