

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000059523

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** SOCO FOR HAIR, INC.

**Current Principal Place of Business:**

240 A1A NORTH  
SUITE 2  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 675  
PONTE VEDRA BEACH, FL 320040675

**New Mailing Address:**

P O BOX 675  
PONTE VEDRA BEACH, FL 320040675 US

**FEI Number:** 27-3129428

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'BRIEN, TERESEA A  
105 ABALONE LANE W  
PONTE VEDRA BEACH, FL 32082 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:** D  
**Name:** O'BRIEN, TERESA A  
**Address:** 105 ABALONE LANE W  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**Title:** D  
**Name:** JOHNSON, JEFF W  
**Address:** P O BOX 675  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32004

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:** JEFF W. JOHNSON

V P

04/13/2012

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

\_\_\_\_\_  
Date