

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000057685

Entity Name: ZA HAIR STUDIO, INC.

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

915 SOUTH ORLANDO AVENUE  
SUITE 16  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

915 SOUTH ORLANDO AVENUE  
SUITE 16  
MAITLAND, FL 32751 US

**New Mailing Address:**

FEI Number: 45-2566534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIMES, ADAM T  
401 W COLONIAL DRIVE  
SUITE 6  
ORLANDO, FL 32804 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: P  
Name: GARCA, JESSU  
Address: 311 NORTH KNOLL AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: VP  
Name: EHRAMAYANA, AMMY  
Address: 837 STAR LIGHT COVE ROAD, APT 108  
City-St-Zip: ORLANDO, FL 32828

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: JESSU GARCA

PRES

01/08/2012

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

\_\_\_\_\_  
Date