

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000068170

**FILED**  
**Aug 18, 2012**  
**Secretary of State**

**Entity Name:** VIVI'S HAIR CREATIONS SALON, INC.

**Current Principal Place of Business:**

16387 S. TAMIAMI TR. UNIT C  
FT. MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

16387 S. TAMIAMI TR. UNIT C  
FT. MYERS, FL 33908

**New Mailing Address:**

**FEI Number:** 45-2980745

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MONTANO, NATALIA  
2702 SW 3RD PLACE  
CAPE CORAL, FL 33914 US

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

SZALIGA, VIVIANA  
2702 SW 3RD PLACE  
CAPE CORAL, FL 33914 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: VIVIANA SZALIGA

08/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VS  
Name: MONTANO, NATALIA  
Address: 2702 SW 3RD PLACE  
City-St-Zip: CAPE CORAL, FL 33914

Title: PT  
Name: SZALIGA, VIVIANA  
Address: 2702 SW 3RD PLACE  
City-St-Zip: CAPE CORAL, FL 33914

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: VIVIANA SZALIGA

PRES

08/18/2012

Electronic Signature of Signing Officer or Director

Date