

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000071900

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

**Entity Name:** BRAZILS WAXING CENTER, INC.

**Current Principal Place of Business:**

7122 TOWNER TRACE  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

521 EAST TENNESSEE STREET  
TALLAHASSEE, FL 32308 US

**Current Mailing Address:**

7122 TOWNER TRACE  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

521 E. TENNESSEE STREET  
TALLAHASSEE, FL 32308 US

**FEI Number:** 45-3003190

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, ROBERT S ESQ.  
545 EAST TENNESSEE STREET  
SUITE 200-B  
TALLAHASSEE, FL 32308 US

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

WILLIAMS, ROBERT S ESQ.  
545 EAST TENNESSEE STREET  
SUITE B-200  
TALLAHASSEE, FL 32308 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:

01/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTS  
Name: BLOCKER, BECKY M  
Address: 3216 CRANLEIGH DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309 US

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: BECKY M. BLOCKER

PTS

01/13/2012

Electronic Signature of Signing Officer or Director

Date