2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000023701

Entity Name: MARION'S HAIR CONNECTIONS, INC.

FILED Jan 30, 2009 Secretary of State

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

6001 SOUTH DIXIE HIGHWAY WEST PALM BEACH, FL 33405

Current Mailing Address: New Mailing Address:

6001 SOUTH DIXIE HIGHWAY WEST PALM BEACH, FL 33405

FEI Number: 65-0400622 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:

MORTIMER -BRAND, MARION R.

1178 JASON WAY

1178 JASON WAY

MORTIMER -BRAND, MARION E P

1178 JASON WAY

MORTIMER -BRAND, MARION E P

WEST PLAM BEACH, FL 33406 US WEST PLAM BEACH, FL 33406 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: MARION MORTIMER-BRAND 01/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: MORTIMER- BRAND, MARION R. Name: MORTIMER- BRAND, MARION E P

Address: 1178 JASON WAY Address: 1178 JASON WAY

City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARION MORTIMER-BRAND P 01/30/2009

Electronic Signature of Signing Officer or Director

Date