

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000077656

Entity Name: V.I.P. HAIR STUDIO INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

710 WASHINGTON AVE.
SUITE C7
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

710 WASHINGTON AVE.
SUITE C7
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 65-0457607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALIS, MICHAEL
710 WASHINGTON AVE.
SUITE C7
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DALIS, MICHAEL
Address: 19370 COLLINS AVENUE #804
City-St-Zip: MIAMI BEACH, FL 33160

Title: PS (X) Delete
Name: VINDENMAN, LOREN
Address: 19390 COLLINS AVE APT 604
City-St-Zip: SUNNY ISLES, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DALIS, MICHAEL
Address: 19370 COLLINS AVENUE #804
City-St-Zip: MIAMI BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL DALIS

P

02/19/2009

Electronic Signature of Signing Officer or Director

Date