

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P93000079859

FILED
Apr 27, 2011
Secretary of State

Entity Name: HAIR ILLUSIONS ASSOCIATES, INCORPORATED

Current Principal Place of Business:

4400 HIGHWAY 20 E
SUITE 309
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

4400 HIGHWAY 20 E
SUITE 309
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 59-3262597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, JOHN A
4400 HIGHWAY 20 E
SUITE 309
NICEVILLE, FL 32578 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: JOHN LARSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD
Name: LARSON, JOHN A
Address: 4400 HWY 20 E. #309
City-St-Zip: NICEVILLE, FL 32578

Title: VSD
Name: LARSON, PATRICIA E
Address: 4400 HWY 20 E. #309
City-St-Zip: NICEVILLE, FL 32578

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: JOHN LARSON

Electronic Signature of Signing Officer or Director

PRES

04/27/2011

Date