## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000034211

FILED Jan 15, 2009 Secretary of State

Entity Nar	me: HAIR B	IZ STYLISTS, INC.				-	
Current Principal Place of Business:				New Principal Place of Business:			
PINE SPR	MPSHIRE BI INGS PLZ PRINGS, FL						
Current Mailing Address:				New Mailing Address:			
PINE SPR	MPSHIRE BI INGS PLZ PRINGS, FL						
FEI Number:	FEI Number: 59-3242211 FEI Number Applied For ( )			lumber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
PINE SPR	MPSHIRE BI						
	named entit e of Florida.	y submits this statem	ent for the purpose	e of changing i	ts registere	ed office or registered agent, or both,	
SIGNATUR	RE:						
	Electr	onic Signature of Reg	gistered Agent			Date	
Election Car	npaign Financ	ing Trust Fund Contribu	ition ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	TAJI, DARLE 760 W HAMF DUNNELLON	PHIAN BLVD I, FL 34434		Title: Name: Address: City-St-Zip:	DUNNELLO	MPHIAN BLVD ON, FL 34434	
Title:	VP	( ) Delete		Title:	VP	(X) Change ( ) Addition	

() Delete Title:

TRAJI, ARTHUR Name: Address: 760 W HAMPHIAN BLVD DUNNELLON, FL 34434 City-St-Zip:

TAJE, ARTHUR Name:

Address: 760 W HAMPHIAN BLVD DUNNELLON, FL 34434 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: DARLENE TAJE D 01/15/2009