

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000010057

Entity Name: CAPRI BEAUTY SALON INC

FILED
Apr 25, 2008
Secretary of State

Current Principal Place of Business:

7904 WEST DRIVE #1
N. BAY VILLAGE, FL 33141

New Principal Place of Business:

Current Mailing Address:

7904 WEST DRIVE #1
N. BAY VILLAGE, FL 33141

New Mailing Address:

FEI Number: 65-0560704

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANNHAUSER, PATRICIA
1865 JFK 79 ST
CAUSEWAY #3N
MIAMI, FL 33141 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: S () Delete
Name: TANNHAUSER, PATRICIA
Address: 1865 JFK 79 ST #3N
City-St-Zip: N BAY VILLAGE, FL 33141

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change () Addition
Name: TANNHAUSER, PATRICIA
Address: 1865 JFK 79 ST #3N
City-St-Zip: N BAY VILLAGE, FL 33141

Title: MS () Change (X) Addition
Name: STONE, MARIA T
Address: 1865 KENNEDY CAUSEWAY, #14M
City-St-Zip: NORTH BAY VILLAGE, FL 33141

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: PATRICIA TANNHAUSER

MS

04/25/2008

Electronic Signature of Signing Officer or Director

Date