

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000047753

FILED  
Mar 24, 2009  
Secretary of State

Entity Name: MICHELINE HAIR SALON, INC.

## Current Principal Place of Business:

5035 SOUTH LAKELAND DRIVE  
LAKELAND, FL 33813

## New Principal Place of Business:

## Current Mailing Address:

5035 SOUTH LAKELAND DRIVE  
LAKELAND, FL 33813

## New Mailing Address:

FEI Number: 59-3386229

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARTMAN, STEPHEN H  
908 SOUTH FLORIDA AVENUE  
STE 102 COLONIAL BLDG.  
LAKELAND, FL 33803 US

## Name and Address of New Registered Agent:

ARTMAN, STEPHEN H  
925 SOUTH FLORIDA AVENUE  
LAKELAND, FL 33803 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WILSON, MICHELINE  
Address: 330 SHADOW MOSS COURT  
City-St-Zip: LAKELAND, FL 33813

Title: VP ( ) Delete  
Name: SOUTHWELL, COLIN  
Address: 330 SHADOW MOSS CT  
City-St-Zip: LAKELAND, FL 33813

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MICHELINE WILSON

D

03/24/2009

Electronic Signature of Signing Officer or Director

Date