

2012 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 26, 2012
Secretary of State

Entity Name: SIGNATURE SALONS OF FLORIDA, INC.

Current Principal Place of Business:

5191 S UNIVERSITY DR
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4581 WESTON ROAD #377
WESTON, FL 33331

New Mailing Address:

14201 W SUNRISE BLVD
SUITE 103
SUNRISE, FL 33323

FEI Number: 65-0705899

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORSCH, DELORES S P
3860 HERON RIDGE LANE
WESTON, FL 33331 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: DORSCH, DELORES S P
Address: 3860 HERON RIDGE LANE
City-St-Zip: WESTON, FL 33331

Title: VP
Name: MANIATAKOS, SUSAN VP
Address: 12526 SW 9TH PLACE
City-St-Zip: DAVIE, FL 33325 BR

Title: VP
Name: ROACH, MICHELLE L VP
Address: 600 HERITAGE DRIVE
City-St-Zip: WESTON, FL 33327 BR

Title: VP
Name: VENGEL, KIMBERLY VP
Address: 9645 SYCAMORE COURT
City-St-Zip: DAVIE, FL 33325 BR

Title: VP
Name: CAMMARANO, CINDY VP
Address: 3153 PEACHTREE CIRCLE
City-St-Zip: DAVIE, FL 33328 BR

Title: D
Name: SCHEINHAUS, CAMILLE D
Address: 2130 N.W. 99TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33024 BR

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: DELORES S DORSCH

P

01/26/2012

Electronic Signature of Signing Officer or Director

Date