

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000012865

FILED
Aug 16, 2008
Secretary of State

Entity Name: THE BARBER SHOP, INC. OF CENTRAL FLORIDA

Current Principal Place of Business:

108 SOUTH SEMORAN BLVD.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

108 S. SEMORAN BLVD.
WINTER PARK, FL 32792

New Mailing Address:

108 SOUTH SEMORAN BLVD.
WINTER PARK, FL 32792

FEI Number: 59-3433753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORIARTY, JAMES D
2021 FRENCH AVE.
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

MORIARTY, JAMES D
108 S. SEMORAN BLVD.
WINTER PARK, FL 32792 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: JAMES D. MORIARTY

08/16/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MORIARTY, JAMES D
Address: 2021 FRENCH AVE.
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: MORIARTY, CAROL E
Address: 2021 FRENCH AVE.
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MORIARTY, JAMES D
Address: 108 S. SEMORAN BLVD.
City-St-Zip: WINTER PARK, FL 32792

Title: D (X) Change () Addition
Name: MORIARTY, CAROL E
Address: 108 S. SEMORAN BLVD.
City-St-Zip: WINTER PARK, FL 32792

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: JAMES D. MORIARTY

D.

08/16/2008

Electronic Signature of Signing Officer or Director

Date