

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000045665

FILED
Apr 30, 2009
Secretary of State

Entity Name: HAIR'S HOW WE DO IT!, INC.

Current Principal Place of Business:

940 PARK AVENUE
SUITE 102
LAKE PARK, FL 33403

New Principal Place of Business:

1408 N KILLIAN DRIVE
SUITE 102
LAKE PARK, FL 33403

Current Mailing Address:

940 PARK AVENUE
SUITE 102
LAKE PARK, FL 33403

New Mailing Address:

1408 N KILLIAN DRIVE
SUITE 102
LAKE PARK, FL 33403

FEI Number: 65-0776379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRBY, SABRINA
940 PARK AVENUE
SUITE 102
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

KIRBY, SABRINA
1408 N KILLIAN DRIVE
SUITE 102
LAKE PARK, FL 33403 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: SABRINA KIRBY

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KIRBY, SABRINA
Address: 940 PARK AVENUE, STE. 102
City-St-Zip: LAKE PARK, FL 33403

Title: VP () Delete
Name: CLEMMONS, FAYTHE A
Address: 940 PARK AVE SUITE 102
City-St-Zip: LAKE PARK, FL 33403

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KIRBY, SABRINA
Address: 1408 N KILLIAN DRIVE S102
City-St-Zip: LAKE PARK, FL 33403

Title: VP (X) Change () Addition
Name: CLEMMONS, FAYTHE A
Address: 1408 N KILLIAN DR SUITE 102
City-St-Zip: LAKE PARK, FL 33403

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: SABRINA KIRBY

PRES

04/30/2009

Electronic Signature of Signing Officer or Director

Date