

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000060091

Entity Name: DE'JAVU SALON, INC.

**FILED**  
**Jan 26, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

11018 OLD ST. AUGUSTINE RD. #122  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

11018 OLD ST. AUGUSTINE RD. #122  
JACKSONVILLE, FL 32257

**New Mailing Address:**

FEI Number: 59-3464739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, ANN K ESQ.  
550 WATER STREET, STE. 1150  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

WILLIAMS, HENRY L  
10644 SQUIRES COURT  
JACKSONVILLE, FL 32257 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: HENRY L. WILLIAMS

01/26/2010

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: P  
Name: SWANSTROM, TRINA R  
Address: 4510 SUMMER HAVEN BLVD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP  
Name: SWANSTROM, ASHLEY M  
Address: 4510 SUMMER HAVEN BLVD SOUTH  
City-St-Zip: JACKSONVILLE, FL 32258

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: TRINA R. SWANSTROM

P

01/26/2010

Electronic Signature of Signing Officer or Director

Date