2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# P97000085078

Entity Name: SAGE SALON, INC.

Current Principal Place of Business:

5601 S DIXIE HWY
WEST PALM BEACH, FL 33405

New Principal Place of Business:

11300 LEGACY AVE
BLD J SUITE 200-2
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

5601 S DIXIE HWY
WEST PALM BEACH, FL 33405

New Mailing Address:

1522 LINDA LOU DR
WEST PALM BEACH, FL 33415

FEI Number: 65-0797456 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAE, BARBARA M
5601 S DIXIE HWY
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

RAE, BARBARA M
11300 LEGACY AVE
BLD J SUITE 200-2
PALM BEACH GARDENS, FL 33410 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: _____ 04/09/2008
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPTS ( ) Delete
Name: RAE, BARBARA M
Address: 1522 LINDA LOU DR
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BARBARA RAE PRES 04/09/2008
Electronic Signature of Signing Officer or Director — Date