

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000001830

FILED  
Apr 25, 2011  
Secretary of State

**Entity Name:** ABOUT FACE BEAUTY & BRIDAL SALON, INC.

**Current Principal Place of Business:**

400 S. ORLANDO AVE.  
SUITE T  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

144 RIVER OAKS CR.  
SANFORD, FL 32771

**New Mailing Address:**

400 S. ORLANDO AVE.  
SUITE T  
WINTER PARK, FL 32789

**FEI Number:** 59-3483855

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LARSEN, KARI L  
144 RIVER OAKS CR.  
SANFORD, FL 32771 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: P  
Name: LARSEN, KARI L  
Address: 144 RIVER OAKS CR.  
City-St-Zip: SANFORD, FL 32771

Title: VP  
Name: LAMM, GINA M  
Address: 294 LAKE DOE BLVD.  
City-St-Zip: APOPKA, FL 32703

Title: D  
Name: LARSEN, RICHARD S  
Address: 144 RIVER OAKS CR.  
City-St-Zip: SANFORD, FL 32771

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: KARI L. LARSEN

P

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date