## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000015773

Entity Name: ROSES BEAUTY SALON, INC.

FILED Jan 28, 2008 Secretary of State

Current Princip	pal Place of Business:	New Principal Place of Business

9564 SOUTHWEST 160TH STREET 10988 SW 184 ST MIAMI, FL 33157 **BAY 12** 

MIAMI, FL 33157

**Current Mailing Address: New Mailing Address:** 

9564 SOUTHWEST 160TH STREET 10988 SW 184 ST MIAMI, FL 33157 **BAY 12** 

MIAMI, FL 33157

FEI Number: 65-0814578 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CHARLES L JONES 9900 SW 168TH STRET SUITE 9 MIAMI, FL 33157 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

RICHARDS, WILMA SHIRLEY, DACOSTA Name: Name: 9564 SOUTHWEST 160TH STREET 9660 SW 155 AVENUE Address: Address:

City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33196

Title: VD Title: VD () Delete (X) Change ( ) Addition RICHARDS, JOSEPH Name: Name: MAUREEN, CLARKE

9564 SOUTHWEST 160TH STREET 11316 SW 166 TR Address: Address: MIAMI, FL 33157 MIAMI, FL 33157 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: STD STD (X) Change ( ) Addition

RICHARDS, DUANE Name: SHIRLEY, DACOSTA Name: 9564 SOUTHWEST 160TH STREET 9660 SW 155 AVE Address: Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33196

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.

Ρ SIGNATURE: SHIRLEY DACOSTA 01/28/2008