


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000046297 1. Entity Name HAIR TECHNOLOGY OF JACKSONVILLE, INC.	
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Principal Place of Business HAIR TECHNOLOGY OF JACKSONVILLE, INC. 6028 MERRILL RD JACKSONVILLE, FL 32271 US	Mailing Address 3241 ABBEY FIELD LN JACKSONVILLE, FL 32277
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DO NOT WRITE IN THIS SPACE

10/2
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 FEB 21 AM 9:22



02092007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3509581	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**LEGGETT, JULIA A
3241 ABBEY FIELD LN
JACKSONVILLE, FL 32277**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LEGGETT, JULIA A 3241 ABBEYFIELD LN JACKSONVILLE, FL 32277
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LEGGETT, ALFRED JR 3241 ABBEYFIELD LN JACKSONVILLE, FL 32277
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  2-19-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

242

SIMONIC

Simonic, Simonic, Ratnecht & Associates, Inc.

Certified Public Accountants

8750 Perimeter Park Boulevard Jacksonville, FL 32216-6347

Phone: 904-928-1040 Fax: 904-928-0909

www.simonic.net

February 9, 2007

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

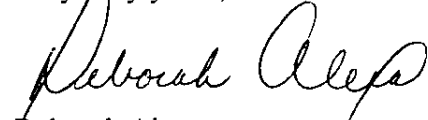
RE: Jahira's Salon & Spa Inc.
(Formerly Hair Technology of Jacksonville, Inc.)
7001 Merrill Road, Suite 44
Jacksonville, FL 32277
EIN#59-3509581
Document #P098000046297

The above referenced taxpayer had made an advanced payment to renew his corporation for the year 2007 in 2006. I have attached the original correspondence for your reference as well as the 2007 Signed copy of the Corporation Annual Report. A representative from your office stated that a letter has to be written to your office in order to disburse the funds of \$150.00 that is now being held by the State. These funds will then be released to cover the 2007 renewal process.

Please consider this letter the authorization to do as described above.

Should you have any questions, do not hesitate to contact this office or the taxpayer himself.

Very truly yours,



Deborah Alexa
Office Manager