

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000059982

FILED
Mar 06, 2009
Secretary of State

Entity Name: SLAVES OF BEAUTY SALON, INC.

Current Principal Place of Business:

64 SOUTH FEDERAL HWY
BOCA RATON, FL 33432 US

New Principal Place of Business:

142 SE 5 AVE
DELRAY BEACH, FL 33483 US

Current Mailing Address:

64 SOUTH FEDERAL HWY
BOCA RATON, FL 33432 US

New Mailing Address:

142 SE 5 AVE
DELRAY BEACH, FL 33483 US

FEI Number: 65-0863261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HERNANDEZ, LUIS C
200 NE 23 ST
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

HERNANDEZ, LUIS C
173 SE 5 AVE
3
DELRAY BEACH, FL 33483 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: LUIS C HERNANDEZ

03/06/2009

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: PTD () Delete
Name: HERNANDEZ, LUIS C
Address: 200 NE 23 ST
City-St-Zip: POMPANNO BEACH, FL 33060 US

Title: SVD () Delete
Name: CAMBRA, SONIA M
Address: 9900 SUNRISE LAKES BLVD #208
City-St-Zip: SUNRISE, FL 33322 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: HERNANDEZ, LUIS C
Address: 173 SE 5 AVE #3
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: SVD (X) Change () Addition
Name: CAMBRA, SONIA M
Address: 4819 WEDGEWOOD WAY #205
City-St-Zip: WEST PALM BEACH, FL 33147 US

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: LUIS C HERNANDEZ

PDT

03/06/2009

Electronic Signature of Signing Officer or Director

Date