

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000075213

Entity Name: STUDIO Z HAIR & NAILS, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

1575 NORTHEAST 26TH STREET  
WILTON MANORS, FL 333051323

## New Principal Place of Business:

1575 NORTHEAST 26TH STREET  
WILTON MANORS, FL 333051323 US

## Current Mailing Address:

1575 NORTHEAST 26TH STREET  
WILTON MANORS, FL 333051323

## New Mailing Address:

1575 NORTHEAST 26TH STREET  
WILTON MANORS, FL 333051323 US

FEI Number: 65-0863565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZUPAN, GARY  
1575 NORTHEAST 26TH STREET  
WILTON MANORS, FL 333051323 US

## Name and Address of New Registered Agent:

ZUPAN, BERNADETTE  
1575 NORTHEAST 26TH STREET  
WILTON MANORS, FL 333051323 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: BERNADETTE ZUPAN

05/01/2009

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: VD ( ) Delete  
Name: ZUPAN, BERNADETTE  
Address: 1575 NORTHEAST 26TH STREET  
City-St-Zip: WILTON MANORS, FL 333051323

## 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: BERNADETTE ZUPAN

MRS

05/01/2009

Electronic Signature of Signing Officer or Director

Date