

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000086158

FILED
Jan 05, 2006
Secretary of State

Entity Name: LEHAIRCUT BY TONIN FO SARASOTA, INC.

Current Principal Place of Business:

1239 N GUKFSTREAM AVE
SARASOTA, FL 342368901

New Principal Place of Business:

1239 N GULFSTREAM AVE
SARASOTA, FL 34236

Current Mailing Address:

1239 N GUKFSTREAM AVE
SARASOTA, FL 342368901

New Mailing Address:

1239 N GULFSTREAM AVE
SARASOTA, FL 342368901

FEI Number: 65-0867734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROSSI, ANNTHONIA
4895 CEDAR OAK WAY
SARASOTA, FL 34233 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PROSSI, ANNTHONIA
Address: 4895 CEDAR OAK WAY
City-St-Zip: SARASOTA, FL 34233

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 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: ANNTHONIA PROSSI

PRES

01/05/2006

Electronic Signature of Signing Officer or Director

Date